STUDENT HANDBOOK

Barry University School of Podiatric Medicine
320 NW 115th Street Miami Shores, FL 33168
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Welcome!

Congratulations on your acceptance to Barry University School of Podiatric Medicine! Today you have made a wise choice and a solid investment. You have made an investment in yourself. And over the next four years of medical school and three years of residency training, you will work diligently to realize a return on that investment. In comparison to the majority of other medical specialties, your commitment and determination will lead to the ideal work-life balance that only podiatric medicine and surgery can offer.

I welcome you to the Barry University School of Podiatric Medicine, a proven leader in medical education, hospital-based clinical training, and research, and the only faith-based school of podiatric medicine and surgery in the country. We are absolutely thrilled to be a part of your journey through the rigors of medical school as you pave the way to one of the premier residency positions in our nation’s teaching and federal hospital systems. Our elite faculty and expert staff will teach and guide you along the way, and we remain totally committed to facilitating your evolution to becoming exceptional physicians and surgeons. I look forward to the day that you join us as colleagues and earn the privilege of improving the lives of your own patients.

*Bryan D. Caldwell, DPM, MD*

Dean of the School of Podiatric Medicine
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 2019-2020

<table>
<thead>
<tr>
<th>SUMMER 2019</th>
<th>FALL 2019</th>
</tr>
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<tbody>
<tr>
<td>POD 4th Year Clerkships Begin</td>
<td>New student orientation</td>
</tr>
<tr>
<td>Classes begin</td>
<td>Wed., August 21 – Thur., August 22</td>
</tr>
<tr>
<td>Memorial Day (no classes)</td>
<td>Classes begin</td>
</tr>
<tr>
<td>Mon., May 20</td>
<td>Mon., August 26</td>
</tr>
<tr>
<td>APMLE Part III (2019)</td>
<td>APMLE Part II CSPE</td>
</tr>
<tr>
<td>Independence Day (no classes)</td>
<td>Tue., August 20 to Wed., Nov 13 (Registration ends TBA)</td>
</tr>
<tr>
<td>Wed., June 5 (Registration ends May 29)</td>
<td>3rd year clinical orientation</td>
</tr>
<tr>
<td></td>
<td>Wed., August 28 – Thur., August 29</td>
</tr>
<tr>
<td></td>
<td>Rite of Passage</td>
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<tr>
<td></td>
<td>Fri., August 30</td>
</tr>
<tr>
<td></td>
<td>Labor Day (no classes)</td>
</tr>
<tr>
<td></td>
<td>Mon., September 2</td>
</tr>
<tr>
<td></td>
<td>Junior clinical rotation begins</td>
</tr>
<tr>
<td></td>
<td>Wed., September 4</td>
</tr>
<tr>
<td></td>
<td>APMLE Part I (2019)</td>
</tr>
<tr>
<td></td>
<td>Wed., October 2 (Registration ends Sep. 20)</td>
</tr>
<tr>
<td></td>
<td>Last day to withdraw with a “W”</td>
</tr>
<tr>
<td></td>
<td>Fri., November 1</td>
</tr>
<tr>
<td>Event</td>
<td>Date/Details</td>
</tr>
<tr>
<td>--------------------------------------------</td>
<td>------------------------------------------------</td>
</tr>
<tr>
<td><strong>Fall OSCE</strong></td>
<td></td>
</tr>
<tr>
<td>Thanksgiving Holiday (no classes)</td>
<td>Thurs., November 28 – Sun., December 1</td>
</tr>
<tr>
<td>Classes end</td>
<td>Fri., December 6</td>
</tr>
<tr>
<td>APMLE Part II (2020)</td>
<td>(January 2, 2020 Registration ends December 17, 2019)</td>
</tr>
<tr>
<td>Final exam week</td>
<td>Mon., December 9 - Fri., December 13</td>
</tr>
<tr>
<td>Christmas Break</td>
<td>Sat., December 21 – Mon., January 3, 2019</td>
</tr>
<tr>
<td><strong>SPRING 2020</strong></td>
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<tr>
<td>Centralized Residency Interview Program (CRIP)</td>
<td>Thur., January 9 to Tues., January 14</td>
</tr>
<tr>
<td>Classes begin</td>
<td>Mon., January 13</td>
</tr>
<tr>
<td>Science and Management Symposium (SAM), Orlando</td>
<td>Wed., January 15 - Sun., January 19</td>
</tr>
<tr>
<td>Martin Luther King, Jr. Day (no classes)</td>
<td>Mon., January 20</td>
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<tr>
<td>APMLE Part II (2020)</td>
<td>Tue., February 19 (Registration ends February 07)</td>
</tr>
<tr>
<td>Spring Break (no classes)</td>
<td>Mon., March 2 – Fri., March 6</td>
</tr>
<tr>
<td>Senior Match Week</td>
<td>Mon., March 16 – Fri., March 20</td>
</tr>
<tr>
<td>Last day to withdraw with a “W”</td>
<td>Fri., March 20</td>
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<tr>
<td>Junior Class Objective Structured Clinical Examination (OSCE)</td>
<td>Fri., April 3</td>
</tr>
<tr>
<td>Easter Holiday (no classes)</td>
<td>Thurs., April 9 – Fri., April 10</td>
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<tr>
<td>Classes End</td>
<td>Wed., April 24</td>
</tr>
<tr>
<td>Final exam week</td>
<td>Mon., April 27 - Fri., May 1</td>
</tr>
<tr>
<td>APMLE Part II</td>
<td>Wed., May 6 (Registration ends April 22)</td>
</tr>
<tr>
<td>Commencement</td>
<td>Sat., May 2</td>
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<tr>
<td>4th year externship begin</td>
<td>Mon., May 4</td>
</tr>
<tr>
<td><strong>SUMMER 2020</strong></td>
<td></td>
</tr>
<tr>
<td>Classes begin</td>
<td>Mon., May 18</td>
</tr>
<tr>
<td>Memorial Day (no classes)</td>
<td>Mon., May 25</td>
</tr>
<tr>
<td>APMLE Part III (2020)</td>
<td>TBA (Registration ends TBA)</td>
</tr>
<tr>
<td>3rd year board prep. (no classes, no clinics)</td>
<td>TBA ~ 1 week before boards</td>
</tr>
<tr>
<td>Independence Day (no classes)</td>
<td>Fri., July 3</td>
</tr>
<tr>
<td>APMLE Part I (2020)</td>
<td>TBA (Registration ends TBA)</td>
</tr>
<tr>
<td>2nd and 3rd year classes end</td>
<td>Fri., July 24</td>
</tr>
<tr>
<td>Final exams end</td>
<td>Mon., July 27 - Fri., July 31</td>
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</tbody>
</table>
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

Goal 1

Produce highly educated, competent, compassionate doctors of podiatric medicine;

Programmatic Outcome:

- BUSPM will graduate students that demonstrate the necessary knowledge, skills, and attitudes to compete for placement in a post-graduate podiatric residency program;

Goal 2

Recruit and retain a diverse and qualified student body;

Programmatic Outcomes:

- Implement a more comprehensive admissions process that would contribute to / enhance the diversity of the class;
- Retain and graduate all matriculated students;

Goal 3

Increase visibility of BUSPM inside and outside the Barry community;

Programmatic Outcomes:

- Develop a sound marketing plan designed to raise awareness of the profession, the program, and careers and accomplishments of faculty;
- Develop a ‘pipeline to podiatric medicine’ program;
- Increase faculty publications in scholarly journals;

Goal 4

Maintain a collaborative, productive learning environment that positively impacts student experience;

Programmatic Outcomes:

- Enhance basic science experience;
- Enhance clinical rotation experience;
- Encourage faculty to engage in professional development;
- Encourage staff to engage in professional development;

Goal 5

Increase alumni engagement.

Programmatic Outcome:

- Strengthen existing alumni relations.
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

<table>
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<tr>
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</table>
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 basic sciences 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

## FIRST YEAR

### Fall

<table>
<thead>
<tr>
<th>Code</th>
<th>Course Title</th>
<th>Semester Hours</th>
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<tbody>
<tr>
<td>SPM 525</td>
<td>Introduction to Podiatric Medicine</td>
<td>2</td>
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<tr>
<td>SPM 527</td>
<td>Biochemistry I</td>
<td>3</td>
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<tr>
<td>SPM 536</td>
<td>Research Methodology, Epidemiology &amp; Statistics</td>
<td>3</td>
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<tr>
<td>SPM 550</td>
<td>Histology and Cell Biology w/lab</td>
<td>5</td>
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<tr>
<td>SPM 590</td>
<td>Gross Anatomy w/lab</td>
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### Spring

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<th>Semester Hours</th>
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<tbody>
<tr>
<td>SPM 528</td>
<td>Biochemistry II/Nutrition</td>
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<tr>
<td>SPM 547</td>
<td>Neuroanatomy w/lab</td>
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<tr>
<td>SPM 595A</td>
<td>Physiology I</td>
<td>4</td>
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<tr>
<td>SPM 625A</td>
<td>Applied Lower Extremity Anatomy I w/lab</td>
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</table>

## SECOND YEAR

### Summer

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<tbody>
<tr>
<td>SPM 595B</td>
<td>Physiology w/lab</td>
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<tr>
<td>SPM 610</td>
<td>Clinical Neurology</td>
<td>2</td>
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<tr>
<td>SPM 623</td>
<td>Medical Microbiology I</td>
<td>2</td>
</tr>
<tr>
<td>SPM 625B</td>
<td>Applied Lower Extremity Anatomy II w/lab</td>
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<tr>
<td>SPM 627</td>
<td>Introduction to Functional Orthopedics</td>
<td>3</td>
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<tr>
<td>SPM 649</td>
<td>General Radiology</td>
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<td>*SPM 665</td>
<td>Independent Study</td>
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<tr>
<td>*SPM 675</td>
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*Elective (May be taken during any second-year semester)

### Fall

<table>
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<tbody>
<tr>
<td>SPM 600</td>
<td>Pathology I</td>
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<tr>
<td>SPM 620</td>
<td>Pharmacology</td>
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<tr>
<td>SPM 624</td>
<td>Medical Microbiology II w/lab</td>
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<tr>
<td>SPM 632</td>
<td>Podiatric Medicine I</td>
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<tr>
<td>SPM 711</td>
<td>Podiatric Radiology</td>
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<tr>
<td>SPM 717</td>
<td>Biomechanics of Foot Function</td>
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<tr>
<td>SPM 717L</td>
<td>Biomechanics Clinical Practicum Lab</td>
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### Spring

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<tr>
<td>SPM 601</td>
<td>Pathology II</td>
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<tr>
<td>SPM 605A</td>
<td>Physical Diagnosis</td>
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<tr>
<td>SPM 621</td>
<td>Clinical Pharmacology</td>
<td>3</td>
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<tr>
<td>SPM 640</td>
<td>Surgical Principles</td>
<td>3</td>
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<tr>
<td>SPM 650</td>
<td>Internal Medicine I</td>
<td>2</td>
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<tr>
<td>SPM 709</td>
<td>Podiatric Medicine II</td>
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<td>SPM 709L</td>
<td>Podiatric Medicine II Lab</td>
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<tr>
<td>SPM 711L</td>
<td>Radiology Lab</td>
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## THIRD YEAR

### Summer

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<tr>
<td>SPM 605B</td>
<td>Physical Diagnosis (Lab)</td>
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<tr>
<td>SPM 705</td>
<td>Emergency &amp; Traumatology I</td>
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<tr>
<td>SPM 706</td>
<td>Emergency &amp; Traumatology II</td>
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<tr>
<td>SPM 750</td>
<td>Internal Medicine II</td>
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<td>Course Title</td>
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</tr>
<tr>
<td>SPM 765</td>
<td>Independent Study</td>
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<tr>
<td>SPM 775</td>
<td>Research</td>
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<tr>
<td>*Elective</td>
<td>(May be taken during any third-year semester)</td>
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### 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  Podiatric Rotating Clinical Clerkship I | 7              |
- SPM 738  Podopediatrics                          | 3              |

### Spring
- 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  Podiatric Rotating Clinical Clerkship 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              |

### FOURTH YEAR

#### Semester Hours

<table>
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<tr>
<th>Course Code</th>
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<tbody>
<tr>
<td>SPM 820</td>
<td>Clinical Rotation</td>
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<tr>
<td>SPM 832</td>
<td>Podiatric Clerkship Program I</td>
</tr>
<tr>
<td>SPM 833</td>
<td>Podiatric Clerkship Program II</td>
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</tbody>
</table>

### Fall
- 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              |
- *SPM 838  Podiatric Clerkship Program VII         | 4              |
- *SPM 819  Communication Skills                   | 1              |
- *SPM 865  Independent Study                       | 1-3            |
- *SPM 875  Research                                | 1-12           |

#### Elective (May be taken during any fourth-year semester)

***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                     | 3              |
A. Basic Medical Sciences Objectives

Upon completion of the basic medical sciences preclinical curriculum, students will be able to:

1) 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 resources to solve clinical problems;
9) Be eligible for the National Board of Podiatric Medical Examiners’ Part I examination;
10) Integrate basic medical 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 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;
9) Organize a treatment plan;
10) Provide appropriate perioperative podiatric care;
11) Demonstrate proficiency in palliative foot care including strapping, padding, injections, paring of lesions, and casting;
12) Demonstrate proficiency in basic podiatric surgical principles, including soft tissue and osseous procedures;
13) Apply knowledge of pharmacology and therapeutics in prescription writing;
14) Generate appropriate charting, whether electronic or paper;
15) 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** (CPME Competency)
- 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 for 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, 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, 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 Mayo-type 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 at performing 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 non-surgical 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 non-surgical 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. 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 Chair of Basic Medical Sciences (years 1 and 2) or by the office of the Associate Academic Dean (years 3 and 4). 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, health) are resolved.

Registration in any and all elective courses must be approved by the Associate Academic Dean, Associate Dean of Clinical Education or the Chair of Basic Medical Sciences 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, Associate Dean of Clinical Education or Chair of Basic Medical Sciences, 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 not 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 is required (i.e., mandatory) in all School of Podiatric Medicine courses, including lectures, laboratory sessions, clinical rotations and demonstration. 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. Students who have been absent without an acceptable excuse from 10% or more of a course’s meetings are subject to failure upon documentation of absence by the instructor.

Attendance at scheduled examinations is mandatory. Examinations may be given outside of normal class hours due to space or time limitations. Examinations will be rescheduled, only if approved by the Associate Academic Dean or the Associate Dean of Clinical Education, and the course instructor, and with unanimous consent of all the students in the course at the time that the change is proposed. 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.

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 the class. In the event that 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 a 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 scheduled examination period 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 http://www.barry.edu/accessibility-services/

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

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.

Many clinical rotation sites also require drug screening of students prior to entering and, in some cases, during the course of clinical training. 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 drug screens performed throughout the four years: 1) prior to matriculation, 2) summer of the 3rd year, 3) spring of the 3rd year.

iii. 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
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 constituted 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

iv. Professional Conduct Code

As students in the most advanced degree program in the University, podiatric medical students must set the example for all other students at Barry University. Students must behave professionally, morally, ethically, and honorably at all times, whether in lecture rooms, laboratories, other campus facilities or off campus. Standards for conduct are delineated in the Barry University Graduate Catalog http://www.barry.edu/registrar/catalog-archives.html Barry University Student Handbook https://www.barry.edu/student-handbook/, this handbook, the Clinical Rotation Training Manual, course syllabi and other documents that may be distributed by faculty and staff.

Disruptive behavior such as violence, shouting, profanity and other behavior that is disrespectful of the rights and sensitivities of the public will not be condoned. 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 course failure and/or judicial action. 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 or Chair of Basic Medical Sciences for disciplinary action that will result in dismissal from Barry University.

v. 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 the course of their education at Barry University, podiatric medical students will conduct themselves in a manner becoming of 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 https://www.barry.edu/student-handbook/

vi. 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 sex-based 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 and 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. Expectations of Students with Respect to Physical Sexual Misconduct

The expectation of our University community regarding sexual misconduct can be summarized as follows: in order 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


B. Expectations of Students with Respect to Consensual Relationships

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


vii. 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.

**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

**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

**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
  - 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 accommodations may be made for a person with a disability or a particular religious requirement.

Labs

Barry University School of Podiatric Medicine scrubs and lab coat are mandatory for all lab courses. Sneakers can be worn only with scrubs and during lab courses. For 1st and 2nd year students, scrubs and sneakers can be worn to class for more comfort.

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 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 pant are inappropriate for clinical rotations. Jeans are not to be worn in any 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 coat 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.

viii. **ID cards**

Students are expected to carry the Barry University student identification card at all times, 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.

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.
F. Academic Advisement

Every student matriculating in BUSPM is assigned an academic advisor by the Chair of Basic Medical Sciences (years 1 and 2) or the Associate Dean of Clinical Education (years 3 and 4). Full-time faculty members assume academic advising responsibilities. Advising assignments may be changed by the Chair of Basic Medical Sciences or by the Associate Dean of Clinical Education, 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 but 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 and 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%
D  66%-69.99%
F  below 66%

Additionally, all students in extended academic programs and all students re-admitted following suspension will be graded as follows:

A  90%-100%
B  80%-89.99%
C  70%-79.99%
F  below 70%

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

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 Dean, Associate Academic Dean, Associate Dean of Clinical Education or Chair of the Basic Medical Sciences. In such cases, the requirements for achieving a CR grade will be stated in the syllabus.

I. Transcripts

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 http://webadvisor.barry.edu. 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. Incomplete Grades

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 or Associate Dean of Clinical Education must be informed in writing by the instructor when an “I” grade is issued. 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 or Associate Dean of Clinical Education for signature and then to the Registrar. Students, under special extenuating circumstances, (e.g., illness, leave of absence, etc.) may be granted an Incomplete in a course.

If a student has an “I” grade, all written examinations and/or other evaluation criteria must be completed by the end of Wednesday of the first week of the following semester. 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 work should have been completed. In addition, achieving a failing grade in a completed course may result in failure to meet published prerequisites for another course, and may therefore require a schedule adjustment (drop) in the semester in which the incomplete was unsatisfactorily concluded.
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 WebAdvisor 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. For employment a comprehensive registration statement may be requested from the Cashier/Business Office. This statement includes billing information and final grades once they have been posted.

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 https://www.barry.edu/student-handbook/handbook/ferpa.html.

N. Academic 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, have no more than two unresolved “D” 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 reflect no more than two unresolved “D” grades. If a student earns more than two “D” grades, the student must repeat courses to reconcile the academic deficiency; the course to be repeated (to reduce the number of “D” grades) will be determined by the Faculty-Student Evaluation Committee (FSEC). Unsatisfactory resolution of an “F” or “D” grade or withdrawal from any course that is repeated will lead to automatic suspension from the University. 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.
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. Any student who earns a grade of “D” for a course have the option to take a Comprehensive Remediation Examination for the course, subject to approval by the Faculty-Student Evaluation Committee. 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” or “D” 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” or “D” 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. Any student with two “D” grades already on their transcript, who earns a third “D” grade, must remediate the third “D” grade as described above. If such a student fails to earn a minimum score of 70% then they shall be subject to the Academic Disciplinary Actions described in the Graduate Catalog.

Probation

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

- Earns a cumulative or semester GPA less than 2.0 but at least 1.0; or
- Earns one “F” grade in any semester; or
- Earns two “D” grades in any semester; or
- Earns one “D” grade in each of two consecutive semesters; or
- Earns a third “D” grade when two unresolved “D” grades already exist on his/her transcript from previous semesters.
A student who earns more than two “D” grades must repeat one or more courses in which the grade was earned. The FSEC may require that the student repeat one or more specific courses in which the student has earned a “D” grade. A maximum of two unresolved “D” grades will be allowed at the time of graduation.

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, Associate Dean of Clinical Education or Chair of Basic Sciences 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” or “D” grades. However, a student will not be in good standing until he/she has no unresolved “F” grades and no more than two unresolved “D” 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” or “D” grade in, or withdrawal from, any course that is repeated will lead to suspension from the University.

**Suspension**

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

- Earns a GPA of less than 1.00 in any semester; or
- Qualifies for academic probation for two consecutive semesters; or
- Earns more than one “F” or any combination of “F” and “D” grades in any semester, regardless of GPA; or
- Earns three or more “D” grades in any semester regardless of GPA; or
- Earns a grade less than “C” in the first semester of extended academic coursework; or
- Fails Gross Anatomy (SPM 590).
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 one month 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 FSEC may permit the student to resume course work with degree-seeking or non-degree-seeking status, or may decline readmission. 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**

Students who earn three (3) “F” grades during the course of their podiatric medical studies will be dismissed from the School of Podiatric Medicine and the University.

**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 add to their schedules with the written approval of their advisor, and the Associate Academic Dean or the Associate Dean of Clinical Education.

Any student who is withdrawn from one or more courses in a semester must register for the withdrawn course(s) in the next semester the course(s) is (are) offered. The student may not register for any advanced course that explicitly requires the withdrawn course as a prerequisite.
Withdrawal from a course for poor academic performance is not permitted. 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 may severely limit the number of courses a student may take in future semesters as many courses require prerequisites. 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. In case of schedule modification, the student’s advisor and the Dean must approve and provide signatures on the required documentation.

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 who fail this course and who also fail the remediation exam offered in the spring semester will be suspended, with the opportunity to re-apply to the Program in the subsequent fall. Such students who fail Gross Anatomy at the end of the fall semester will be dismissed from the 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 student’s advisor and with the approval of the Dean and the approval of the Associate Academic Dean, Associate Dean of Clinical Education or the Chair of Basic Medical Sciences. Withdrawal from the Program is permitted only in the following cases:
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 the Dean, Associate Academic Dean, Clinical Education Director, and their advisor. 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 receive a “W” 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 the BUSPM Student Handbook and/or the Office of the Dean of Students 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 six 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 is required. The School of Podiatric Medicine makes no guarantees on the success of such petitions.

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 for D grades (A, B, C, F scale applies), nor will such students be able to drop or withdraw from courses once the courses have begun.

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

All candidates for the degree of Doctor of Podiatric Medicine (D.P.M.) shall have:

1) Satisfactorily completed all basic sciences courses, clinical rotations and requirements, and externships/clerkship program requirements;

2) A GPA of 2.00 or greater with no outstanding F grades and no more than two unresolved D 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 Associate Academic Dean 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.

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, an appeal in writing to the Chair of Basic Medical Sciences or Clinical Education Director or Associate Academic Dean of the School of Podiatric Medicine, who will respond within five business days. If their does not satisfy the student, the student may appeal in writing, within two business days, to the Associate Academic Dean. The Associate Academic Dean will respond within five business days. If this response does not satisfy the student, they must appeal to the Dean of the School of Podiatric Medicine within two business days. 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 and bylaws of the Florida Podiatric Medical Students Association.

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 https://www.barry.edu/student-handbook/

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 Chair of Basic Medical Sciences and 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 the Office of Cashier/Business Office (CBO) 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 the Office of Cashier/Business Office, 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 [https://www.barry.edu/student-handbook/](https://www.barry.edu/student-handbook/)

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’s 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.
<table>
<thead>
<tr>
<th>FEES</th>
<th>1st year</th>
<th>2nd year</th>
<th>3rd year</th>
<th>4th year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$38,960.00</td>
<td>$38,960</td>
<td>$38,960</td>
<td>$38,960</td>
</tr>
<tr>
<td>Student organizations and club fees/dues (optional)</td>
<td>$20 (est. per club annually)</td>
<td>$20 (est. per club annually)</td>
<td>$20 (est. per club annually)</td>
<td>$20 (est. per club annually)</td>
</tr>
<tr>
<td>National Board Exam Fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>American DataBank Immunization Tracking Package</td>
<td>$30</td>
<td>$30</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Admissions Background Package</td>
<td>$95.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug screening</td>
<td>$40</td>
<td>$40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OIG, GSA, OFAC, SSN Trace</td>
<td>$17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>North Shore Medical Center</td>
<td>$91</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupational exposure insurance</td>
<td>$44 ($)22 per semester, fall and spring only)</td>
<td>$44</td>
<td>$44</td>
<td>$44</td>
</tr>
<tr>
<td>Barry student health insurance (required)</td>
<td>$1898</td>
<td>$1898</td>
<td>$1898</td>
<td>$1898</td>
</tr>
<tr>
<td>Anatomy lab supplies</td>
<td>$380 (est.) (scrubs 2 pairs, $80, lab coat $30, gloves $80, leg model $100, dissection kit with instruments $20, anatomy atlas $70)</td>
<td>$80 (scrubs 2 pairs)</td>
<td>$80 (scrubs 2 pairs)</td>
<td>$80 (scrubs 2 pairs)</td>
</tr>
<tr>
<td>Medical instruments</td>
<td></td>
<td>$1500 (est.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Required texts</td>
<td>$425 (est.)</td>
<td>$800 (est.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplemental study materials</td>
<td>$800 (est.) (e.g. USMLE first aid books, pocket podiatry manual, , McMinn’s Color Atlas of Foot &amp; Ankle, Atlas of Human Anatomy, Anatomy of the Lower Extremity)</td>
<td>$1900 (est.) (e.g. Principles and Practice of Podiatric Medicine, Handbook of Lower Extremity Infections, Bone and Joint Imaging, Cutaneous Disorders of the Lower Extremities, foot model)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$15 ID replacement fee</td>
<td></td>
<td>$50 (extra white coat)</td>
<td></td>
</tr>
<tr>
<td>Externships, living expenses for 6 to 8 months</td>
<td></td>
<td></td>
<td></td>
<td>$20,000 ($2500 per month) (housing, food, transportation &amp; airfare)</td>
</tr>
<tr>
<td>Interview week in Texas</td>
<td></td>
<td></td>
<td></td>
<td>$1500 (est.)</td>
</tr>
<tr>
<td>Graduation application fee</td>
<td></td>
<td></td>
<td></td>
<td>$250</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>National Boards</th>
<th>1st year</th>
<th>2nd year</th>
<th>3rd year</th>
<th>4th year</th>
</tr>
</thead>
<tbody>
<tr>
<td>APMLE I-Written</td>
<td>$925</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APMLE II-Written</td>
<td></td>
<td>$925</td>
<td></td>
<td></td>
</tr>
<tr>
<td>APMLE II-CSPE</td>
<td></td>
<td>$1230 (excluding airfare and expenses)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Residency applications</th>
<th>1st year</th>
<th>2nd year</th>
<th>3rd year</th>
<th>4th year</th>
</tr>
</thead>
<tbody>
<tr>
<td>CASPR CRIP Application</td>
<td></td>
<td></td>
<td></td>
<td>$350 - $550 (based on how many residencies designated)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TOTAL PER YEAR</th>
<th>1st year</th>
<th>2nd year</th>
<th>3rd year</th>
<th>4th year</th>
</tr>
</thead>
</table>

Barry University School of Podiatric Medicine Student Handbook, August 2019
B. **Refund Policy**

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 by the end of their first semester:

- Statement of good health, flu shot
- Measles, mumps and rubella (MMR) vaccination, and booster or adequate titer
- Tetanus/diphtheria/pertussis booster within the past 10 years
- Hepatitis B vaccination series
- 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 stating they “exhibit no signs or symptoms of TB”. This can be written on letterhead or a prescription pad).
- Proof of health insurance coverage (picture of front/back of insurance card) effective in the State of Florida along with a waiver form.

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.

ALL 4th year students are required to carry Barry University student health insurance through United Health Care Student Resources. Only students who are completing all
of their Clerkships in the state of Florida are exempt from this requirement OR whose insurance plan is carried by or affiliated with the armed forces

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 to www.studentcenter.uhcsr.com/barry and to American DataBank to complete the waiver(s) and upload your insurance card. These waivers 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 must also be uploaded via American DataBank along with a waiver form that is posted on the website.

Students may waive the student health insurance if:

- Your health insurance company is licensed to do business in the State of Florida and coverage extends to the Miami Dade/Broward county area.
- Coverage must remain in effect while enrolled for classes.
- The premium must be paid in full for the semester in which you are enrolled; premium payments submitted on a monthly basis are not considered continuous coverage.
- Access to primary and specialty care in Miami Dade/Broward County.
- 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)
For More information regarding Waiver Requirements please go to www.studentcenter.uhcsr.com/barry.

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 on 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 access 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.

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.

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:

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:

Liver Function Test
Hepatitis B antibodies (HBsAb) initially
Hepatitis C antibodies (HCsAb) initially
Hepatitis B antigen (HBsAg) at 12 weeks
HIV Panel initially, three-months and six-months post-exposure

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
John Buhrmaster, Director
Monique Kooper Crime Prevention/ Investigation Coordinator
Doug Ressler, Investigation/ Training Coordinator

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 persons 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 https://www.barry.edu/public-safety/ for more information.