Introduction

The Harvard Medical School Master’s Programs Student Handbook (the “Handbook”) begins with a brief history of Harvard Medical School (HMS) followed by information describing the rules, policies, and procedures governing the Master’s programs at HMS.

The Handbook includes descriptions of the curriculum and requirements (plans of instruction) for the Master of Medical Sciences (MMSc) and Master of Discipline degrees and provides incoming and current Master’s students the information necessary to participate successfully in the programs. The Handbook also provides answers to many questions students will have about specific aspects of education and student life at HMS.

Regular review of HMS academic and financial policies and/or curricular requirements may result in changes to rules and/or policies that are published in this document, which is updated at least annually. All students are also expected to be familiar with the policies of Harvard Medical School and Harvard University.

All information in this handbook and in the Course Catalogs of the various schools at Harvard University is subject to revision. From time to time, changes are made in course offerings, academic rules and requirements, and the plans of instruction. Each School at Harvard reserves the right to alter, change, or amend any of these rules and regulations at any time without prior notice. HMS Master’s students are eligible to take courses in other Schools at the University and need to be familiar with and abide by the rules and regulations of each School at which courses are taken. Students are encouraged to review School and program websites for current information. The information contained in this Handbook supersedes any published previously and is subject to change.

Please forward any comments, updates, or questions to the Office for Graduate Education, at graded@hms.harvard.edu.
# Table of Contents

**Mission of Harvard Medical School**

**History of Harvard Medical School**

1. The Master’s Programs at Harvard Medical School
   1.00 The Learning Environment at Harvard Medical School
   1.01 Master’s Degree Students at Harvard Medical School
   1.02 Plans of Instruction for Master of Medical Sciences Programs
   1.03 Plans of Instruction for Master of Discipline Programs
   1.04 Five-Year MD-MMSc Program

2. Academic Information and Policies
   2.01 Academic Calendars for the Master’s Programs
   2.02 Attendance
   2.03 Grading and Examinations
   2.04 Adding or Dropping Courses
   2.05 Cross Registration
   2.06 Full or Part-time Status Requirements
   2.07 Policy on Length of Time to Complete a Master’s Degree
   2.08 Leave of Absence
   2.09 Withdrawal
   2.10 Re-admission
   2.11 Credit for Work Done Prior to Matriculation
   2.12 Credit for Mentored Research/Capstone Project Conducted Away from HMS
   2.13 Transcripts and Enrollment Confirmation Statements
   2.14 Access to Educational Records
   2.15 Advanced Standing Students
   2.16 Curriculum Continuity: Policy on Interruption
   2.17 Satisfactory Academic Progress
   2.18 Student Workload
   2.19 Pregnancy and Childbirth
   2.20 Graduate Student Travel Policy
   2.21 Special Students

3. Master’s Education
   3.01 Office for Graduate Education
   3.02 HMS Master’s Programs
   3.03 Registrar’s Office
   3.04 Student Affairs
   3.05 Office of Recruitment and Multicultural Affairs
   3.06 Advising
   3.07 Educational Computing and MyCourses
   3.08 Master’s Programs Evaluation
   3.09 Tosteson Medical Education Center
   3.10 The Academy at HMS and the Academy Center for Teaching and Learning
   3.11 Francis A. Countway Library of Medicine
   3.12 Program in Graduate Education
3.13 Division of Medical Sciences
3.14 Office for Diversity Inclusion and Community Partnership
3.15 Harvard University Resources for Students

4. Student Conduct and Responsibility
4.00 Principles of Student Conduct and Responsibility
4.01 Responsibilities of Teachers and Learners
4.02 Academic Progress and Review Board for the Master’s Programs
4.03 Academic Progress and Review Board and Student Disciplinary Actions
4.04 Appellate Review
4.05 General Principles for Consideration of Student Performance and Conduct
4.06 Falsification of Admissions Application
4.07 Procedures for Consideration of Academic Performance
4.08 Procedures for Consideration of Unprofessional Conduct
4.09 Academic Dishonesty and Plagiarism
4.10 Violation of Examination Rules
4.11 Submission of Written Work
4.12 Submission of the Same Work to More than One Course
4.13 Library Policies
4.14 Conflict of Interest
4.15 Policies Regarding Drugs and Alcohol
4.16 Policies Regarding Hazing
4.17 Financial Aid Fraud
4.18 Patient Confidentiality
4.19 Harvard University Sexual and Gender-Based Harassment Policy

5. Dual degree Programs
5.01 MD-MMSc or MD-Master of Discipline Programs

6. Financial Obligations
6.01 Tuition, Fees, and Living Expenses
6.02 Tuition Requirements for Master’s Degree Candidates
6.03 Students Withdrawing Mid-Term
6.04 Health Insurance/Fees
6.06 Payment of University Obligations
6.06 Dishonored Checks
6.07 Financial Aid

7. General Policies
7.01 Harvard University Policy Regarding Religious Holidays
7.02 Vacations and Holidays
7.03 Transportation Policy
7.04 Weather and Emergency Conditions
7.05 Program Evaluation – External Review
7.06 Student and Identification Cards
7.07 Computers, Networks and Technology Requirements
7.08 Student E-mail Accounts
7.09 Electronic Communication and Social Media
7.10 Privacy of Information
7.11 Security Checks
7.12 Sign and Banner Posting
7.13 Firearms, Explosives, Combustible Fuels, Fireworks, and Dangerous Weapons
7.14 Obscene or Harassing Telephone Calls
7.15 Patents, Trademarks, and “Use of Name” Regulations
7.16 Discrimination, Harassment, and Student Mistreatment
7.17 Stalking
7.18 Missing Persons Policy
7.19 Emergency Notification System (MessageMe Policy)
7.20 Digital Millennium Copyright Act: Annual Notice to Students
7.21 University-Wide Statement on Rights and Responsibilities
7.22 Minors on Campus Policy
7.23 Harvard University Policy on Access to Electronic Information
7.24 Crime Awareness and Campus Security for Members of the Harvard Community

8. Housing and Dining Services
8.01 Vanderbilt Hall
8.02 Harvard University Housing
8.03 Off-Campus Housing
8.04 Housing for Students with Disabilities
8.05 Housing for Married Students or Students with Children
8.06 Campus Dining
8.07 Crimson Cash

9. Student Health
9.01 General Information
9.02 University Health Services
9.03 Student Health Program
9.04 Work-Related HIV Benefit Plan
9.05 Center for Wellness
9.06 Reproductive Health
9.07 Standard Precautions
9.08 Disability Insurance
9.09 Precautions Against Communicable Diseases
9.10 Drug and Alcohol Abuse and Dependence

10. Services and Programs
10.01 The Office of Communications and External Relations
10.02 Services for Students with Disabilities
10.03 Office for Human Research Administration
10.04 Standing Committee on Animals
10.05 The Ombuds Office
10.06 Harvard University Events and Information Center
10.07 Vanderbilt Hall Athletic Facility
10.08 Harvard International Office
10.09 Work/Life and Family Resources
10.01 Religious Activities
10.11 Security and Police
10.12 Transportation Services
10.13 Harvard Longwood Campus Map
10.14 Voter Registration
10.15 Veterans’ Benefits
10.16 Harvard University Title IX Coordinators
10.17 Harvard University Office of Sexual Assault Prevention and Response
Mission of Harvard Medical School

To create and nurture a diverse community of the best people committed to leadership in alleviating human suffering caused by disease.

History of Harvard Medical School

On September 19, 1782, the president and fellows of Harvard College adopted a report, presented by President Joseph Willard, embodying plans for a medical school. With a handful of students and a faculty of three, classes at the Medical School began in 1783 at Harvard Hall in the College yard and later were transferred to Holden Hall, originally the College Chapel.

Medical education in that era meant attending formal lectures for a term or two, then being apprenticed to a practicing physician for several years. No academic preparation was required, and no written exams were mandatory. Students did not pay tuition but bought tickets to admit them to professors' lectures. Because no hospital existed for teaching, very little clinical training was required for the degree.

The first three professors of the School were John Warren, Professor of Anatomy and Surgery; Benjamin Waterhouse, Professor of the Theory and Practice of Physic; and Aaron Dexter, Professor of Chemistry and Materia Medica. Benjamin Waterhouse had been educated at universities and hospitals in Europe. As a result of his contacts in England, he received a publication printed there in 1798 by Edward Jenner, reporting successful vaccination against smallpox. Waterhouse introduced Jenner's ideas to the U.S. medical community and first used the vaccine on members of his own family. As a result of Waterhouse's vigorous support, smallpox vaccination was tested in Boston and gained acceptance in the U.S.

John Warren, a skilled teacher and surgeon, was instrumental in moving the Medical School to Boston, which was a more convenient location for the faculty to see their private patients as well as those in the dispensaries and military and naval hospitals that were being established in the city. In 1811, Warren's son, John Collins Warren, along with James Jackson, led efforts to found the Massachusetts General Hospital. Because, at that time, all those who had sufficient money were cared for at home, the Massachusetts General Hospital, like most hospitals that were founded in the 19th century, was intended to care for the poor who were physically or mentally ill.

The Medical School moved from Cambridge to Boston in 1810 and has been here ever since. For the first six years, the School was located at 400 Washington Street; from 1816 to 1846, the School was located on Mason Street. In recognition of a gift from the Great and General Court of Massachusetts (based on a private bequest), the School was called the Massachusetts Medical College of Harvard University. In 1847 the Medical School moved to North Grove Street, next to the Bulfinch Building of the Massachusetts General Hospital, providing an intimate physical connection between the School and the hospital. The School remained there until 1883, then
relocated again, this time to Boylston Street in Copley Square, where the new wing of the Boston Public Library now stands. These early moves took place to locate the School near clinical facilities that functioned under other auspices. This approach established a pattern, unique to HMS, of relying upon clinical settings that are intimately related to, but not owned by, the University.

Harvard University President Charles W. Eliot came to office in 1869, and in the few years following, he established a novel curriculum at the Medical School. Admissions standards were raised, written exams requiring passing grades were instituted, new departments of basic and clinical sciences were established, a three-year degree program was introduced, and the apprenticeship system was eliminated. Harvard Medical School became a professional school of Harvard University, setting the United States standard for the organization of medical education within a university.

In 1906, the Medical School moved to Longwood Avenue in Boston, and the five marble-faced buildings that comprise the Quadrangle were dedicated. The Fenway was open farm and marshland when the Medical School moved there, and that combination of a new school and empty land stimulated a migration of hospitals to the area.

The Medical School currently has ten academic departments: Biological Chemistry and Molecular Pharmacology; Biomedical Informatics; Cell Biology; Genetics; Global Health and Social Medicine; Health Care Policy; Microbiology and Immunobiology; Neurobiology; Stem Cell and Regenerative Biology (joint FAS and HMS); and Systems Biology (joint FAS and HMS). HMS also sponsors several multidisciplinary initiatives, programs, centers, and institutes. In addition, some fifty other clinical departments are located in 18 affiliated institutions, where most of the clinical training for medical students, interns, residents, and fellows takes place and where many of our Master’s students are based for their mentored research and capstone projects. The affiliates include Beth Israel Deaconess Medical Center; Brigham and Women's Hospital; Cambridge Health Alliance; Boston Children's Hospital; Dana-Farber Cancer Institute; Forsyth Institute; Harvard Pilgrim Healthcare; Hebrew Senior Life; Joslin Diabetes Center; Judge Baker Children's Center; Massachusetts Eye and Ear Infirmary; Massachusetts General Hospital; McLean Hospital; Mount Auburn Hospital; Schepens Eye Research Institute; Spaulding Rehabilitation Hospital; and Veterans Affairs Boston Healthcare System.

For over two centuries, Harvard Medical School has been a major participant in the effort to understand life, to cure and prevent disease, and to reduce the burden of human illness. The School is a place of "firsts." Since the introduction of smallpox vaccination to America in 1799 by Professor Waterhouse, Harvard Medical School faculty have established a vibrant tradition of discovery and innovation, including the first use of anesthesia for pain control during surgery; the introduction of insulin to the U.S. to treat diabetes; understanding of the role of vitamin B12 in treating anemia; identification of coenzyme A and understanding of proteins; developing tissue culture methods for the polio virus, which paved the way for vaccines against polio; mapping the visual system of the brain; development of the first successful chemotherapy for childhood leukemia; development of the first implantable cardiac pacemaker; discovering the inheritance of immunity to infection; development of artificial skin for burn victims; the first successful heart valve surgery; the first successful human kidney transplant; the first
reattachment of a severed human limb; discovery of the genes that cause Duchenne Muscular Dystrophy, Huntington's Disease, amyotrophic lateral sclerosis (Lou Gehrig's Disease), and Alzheimer's disease, among many others; establishing the importance of tumor vascular supply (angiogenesis) and seeding the field of vascular biology; and discovery of the cause of preeclampsia. Five of our affiliated institutions (Mass General, Brigham and Women's, Dana-Farber, Beth Israel Deaconess, and Children's) rank consistently among the top five independent teaching hospitals nationally in level of biomedical research funding from the National Institutes of Health.

In addition to educating medical students, HMS supports over 700 PhD students registered in the Graduate School of Arts and Sciences and over 80 Master's degree students registered at HMS. PhD research training is provided in biological and biomedical sciences, bioinformatics and integrative genomics, biophysics, chemical biology, immunology, neuroscience, speech and hearing bioscience and technology, systems biology, and virology and takes place both on the Quad and in hospital laboratories. Master's degree programs are offered in bioethics, biomedical informatics, clinical and translational investigation, global health delivery, immunology, and medical education with new programs in regular development.

Perhaps Harvard Medical School's most enduring contribution has been the education of leaders of medicine and health care, establishing a standard of excellence in research, teaching, and the care of patients in America and increasingly in other countries. In the academic realm, Harvard Medical School has trained more current full-time academic faculty, department chairs, and medical school deans than any other single medical school. The challenge of each generation of students is to carry on that proud tradition.

1. The Master’s Programs at Harvard Medical School

1.00 The Learning Environment at Harvard Medical School

Harvard Medical School and its affiliated hospitals are firmly committed to fostering a culture of mutual respect and trust. It is the strong and consistent policy of Harvard Medical School to treat all members of our community with respect, to provide an environment conducive to learning and working, and to ensure equal access to rights, privileges and opportunities without regard to race, color, sex, sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, disability or any other legally protected category. All members of the Harvard Medical School community are expected to create a positive learning environment where students, faculty, and members of the administrative staff treat each other with respect. The environment should be free of harassment, intimidation, exploitation, and abuse, and should be one in which feedback regarding performance can be shared without concern for ridicule or reprisal. See also:

- Responsibilities of Teachers and Learners – Section 4.01
- Discrimination, Harassment, and Student Mistreatment – Section 7.16
1.01 Master’s Degree Students at Harvard Medical School

Master’s degree students at Harvard Medical School are enrolled in post-baccalaureate and/or post-doctoral programs for the purposes of earning an academically-focused Master’s degree. Master’s degree students at HMS do not have any clinical responsibilities or obligations and are not insured by HMS for the provision of clinical care in any clinical setting. Clinical care cannot be provided by HMS Master’s degree students under the auspices of the Medical School.

Some Master’s degree students will, while enrolled at HMS, also be licensed clinical care providers with medical or other clinical staff appointments in HMS’s affiliated hospitals or other clinical settings. In such cases, all clinical activities will be performed under the auspices of the medical/clinical staff appointment provided by the clinical setting. Master’s students must not present themselves as acting on behalf of HMS when providing care to patients under the auspices of their clinical staff appointment. Furthermore, any Master’s student whose mentored research or capstone project involves human subjects should take particular care to separate the conduct of the research project with any clinical care that may be provided by the clinical setting that is incident to that research.

1.02 Plans of Instruction for Master of Medical Sciences Programs

A Master of Medical Sciences (MMSc) degree from HMS represents recognition of successfully completing advanced study and research within a specific topic area related to biomedical research. The requirements for receipt of such a degree are rigorous and standardized across programs. While each MMSc degree program may have a unique focus, all graduates of such programs will: (a) achieve mastery in a core curriculum that prepares individuals for a biomedical research career, (b) conduct meritorious research that is presented in a thesis, and (c) complete other courses that, together with the core curriculum, provide appropriate didactic training to match the program’s focus. In keeping with this concept, each program has a Mission Statement that outlines the goals and objectives of the program.

The MMSc degree requires the completion of 64 credits of didactic and scholarly work, including a minimum of 32 credits in a mentored research experience culminating in a written thesis or similar work. The remaining credits consist of required core courses, electives, and seminars. A dual-degree five-year MD-MMSc program is offered in some programs; for this program, a total of 56 credits, including the minimum 32-credit mentored research experience, are required. Students must be enrolled in the HMS Program in Medical Education to qualify for the dual-degree program. Descriptions of the MMSc programs and their curricula follow:
Clinical Investigation

I. Background and Overview of Program

The Harvard Medical School Master of Medical Sciences in Clinical Investigation (MMSCI) program provides training in the methods and conduct of clinical investigation for future leaders in patient-oriented research. This two-year degree program combines innovative forms of pedagogy from leading Harvard faculty with an individual mentored research experience in a Harvard Medical School-affiliated laboratory.

MMSCI provides outstanding didactic and mentored-research training to early career clinical investigators who to prepare them for leadership roles in patient-oriented research. The major goal of the program is to provide an innovative comprehensive curriculum that allows trainees to develop skills and direct experience in the performance of clinical investigation while simultaneously, through didactic course work, providing them with a strong foundation in the tools and techniques required to be successful clinical investigators.

MMSCI’s objectives are:

1. To provide a strong didactic curriculum that includes training in computational and statistical sciences, epidemiology and study design, biomedical ethics, genetic epidemiology, scientific communication, leadership and management in clinical research, statistical programming, and drug development and safety

2. To allow students to conduct clinical research with an HMS faculty member mentor

3. To provide students with the core skills necessary to write successful grant applications that will help them initiate research careers as independent investigators at academic medical centers.

Upon completion of the program, graduates will be able to apply contemporary research tools to clinically relevant areas of investigation and be highly competitive for careers in patient-oriented research in academic medicine, industry, and regulatory affairs.

Program Outline / Courses

The program is organized as follows:

1. Three intensive workshops, each three-weeks in duration that will occur at the start, middle and end of the two-year program. The first workshop will cover introductory sessions in Clinical Data Science: Design and Analytics I and clinical research ethics. The second workshop will cover scientific communication, genetic epidemiology and Clinical Data Science: Comparative Effectiveness Research I. The final workshop will cover advanced topics in epidemiology, drug development and safety, and leadership.
2. Additional longitudinal instruction will be provided in Clinical Data Science: Design and Analytics II and in Clinical Data Science: Comparative Effectiveness Research II.
3. A weekly longitudinal seminar.
4. A mentored clinical research project under the supervision an HMS faculty mentor.
5. Elective course opportunities at HMS and other Harvard schools.
6. A written thesis and oral thesis defense presentation at the end of the two-year period of study are required. This should take the form of two submitted first-author manuscripts based on the student’s mentored research experience. A traditional thesis may also be accepted.

II. Degree(s) Offered

The Master of Medical Sciences (MMSc) degree in Clinical Investigation is offered. This is a two-year, full-time, 64-credit program that consists of academic training, mentored research training, team-based projects and career-development activities. No part-time options are offered. See Section 2.06 for definitions of full- and part-time.

III. Prerequisites for Admission

Applicants must hold an MD, MBBS or an equivalent doctoral degree and be pursuing research in clinical disciplines. Applicants should have at least three years of post-graduate experience. MD applicants in clinical training programs must have no more than 25% effort allocated to non-academic activities during the two-year period. We will consider candidates with a PhD degree for admission on a case-by-case basis.

In addition, applicants for whom English is not the native language and who did not receive their bachelor’s and doctoral degrees from an institution where English is the language of instruction must take the TOEFL or IELTS. The MMSCI program requires a minimum score of 100 on the internet-based TOEFL test (or 600 on the paper test) or a minimum score of 8 on the IELTS.

IV. Academic Residence Requirements

The MMSCI requires that all didactic coursework and mentored research take place on Harvard’s campus (HMS or other Harvard Schools) or at an HMS-affiliated hospital. The use of contemporary forms of pedagogy including flipped classroom type methods will be incorporated into the longitudinal instruction component of the MMSCI program that occurs between the intensive workshops.

V. Course of Study

A. Concentrations offered

There are no concentrations offered at this time.
B. Curriculum by term

The program begins in July of the first year, with the first intensive workshop, and ends in May of the second year, with the awarding of the degree following the final workshop.

<table>
<thead>
<tr>
<th>YEAR 1: FALL TERM</th>
<th>YEAR 1: SPRING TERM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul</td>
<td>Aug</td>
</tr>
<tr>
<td>Pre course (1 cr)</td>
<td>Research (10 cr)</td>
</tr>
<tr>
<td>Workshop 1 (3 cr)</td>
<td>Flipped Classroom (2 cr)</td>
</tr>
<tr>
<td></td>
<td>Longitudinal Seminar (1 cr)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YEAR 2: FALL TERM</th>
<th>YEAR 2: SPRING TERM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul</td>
<td>Aug</td>
</tr>
<tr>
<td>Research (12 cr)</td>
<td>Research (8 cr)</td>
</tr>
<tr>
<td>Flipped Classroom (2 cr)</td>
<td>Flipped Classroom (2 cr)</td>
</tr>
<tr>
<td>Longitudinal Seminar (1 cr)</td>
<td>Longitudinal Seminar (1 cr)</td>
</tr>
</tbody>
</table>

**Pre-workshop Primer 1 (July)**
- Primer in Clinical Data Science: Design and Analytics
- Primer in Ethics and the IRB

**Workshop 1 (July)**
- Clinical Data Science: Design and Analytics I
- Ethics and the IRB

**Flipped classroom series 1 (August to May)**
- Clinical Data Science: Design and Analytics II
- Clinical Trials

**Longitudinal seminar 1 (August to May)**
- State of the Art Lectures and Student Presentations
Mentored research experience 1 (August to May)
   Patient-oriented research experience under supervision of Harvard-based mentor

Pre-workshop Primer 2 (May)
   Primer in Genetic Epidemiology
   Primer in Clinical Data Science: Comparative Effectiveness Research I

Workshop 2 (May)
   Genetic Epidemiology
   Clinical Data Science: Comparative Effectiveness Research I
   Scientific Communications

Flipped classroom series - Year 2 (July to May)
   Clinical Data Science: Comparative Effectiveness Research II

Longitudinal seminar - Year 2 (July to May)
   State of the Art Lectures and Student Presentations

Mentored research experience - Year 2 (July to May)
   Patient-oriented research experience under supervision of Harvard-based mentor

Pre-workshop 3 (April)
   Primer in Drug Development
   Primer in Leadership & Management

Workshop 3 (April/May)
   Drug Development & Safety
   Leadership & Management
   Advanced Topics in Epidemiology

C. Course descriptions

The use of flipped classroom techniques, whereby students are provided with reading exercises or pre-recorded materials to watch in preparation for a moderated in-person classroom discussion, will be utilized in the program courses.

Clinical Data Science: Design and Analytics I
(Module Directors: Miguel Hernan MD, MPH, ScM, DrPH and Brian Healy, PhD)
This course introduces methods for the generation and analysis of data for clinical research through seamless integration of epidemiology, biostatistics, and machine learning. The course is structured in three components that correspond to the three main objectives of clinical research: description, prediction, and causal inference.
The descriptive component introduces different data types and study designs, summary measures (including frequency and occurrence measures), and statistical inference (hypothesis testing, confidence intervals). The predictive component introduces association measures, regression (linear, logistic) and other learning algorithms with applications to screening and clinical classification. The causal component introduces a causal inference (counterfactual) framework via randomized clinical trials, which covers survival analyses, sample size calculation, biases, and effect heterogeneity. The course emphasizes critical thinking and practical applications, including assignments based on articles published in medical journals and a case study at the end of each week. All methods are taught along with Stata software to implement them.

Clinical Data Science: Design and Analytics II
(Module Directors: Miguel Hernan MD, MPH, ScM, DrPH and Brian Healy, PhD)

This course extends the topics introduced in Design and Analytics I for each of the three goals of clinical research: description, prediction and causal inference. The description sessions discuss data wrangling, data visualization, and unsupervised learning with a focus on clustering. The prediction sessions discuss building and evaluation of predictive models via regression and other learning algorithms. The causal inference sessions discuss advanced design of randomized clinical trials (factorial, non-inferiority, adaptive, crossover, cluster-randomized trials), and evidence synthesis using meta-analysis. The course emphasizes critical thinking and practical applications, including assignments based on articles published in medical journals. All methods are taught along with Stata software to implement them.

Clinical Data Science: Comparative Effectiveness Research I
(Module Directors: Miguel Hernan, MD, MPH, ScM, DrPH and Brian Healy, PhD)

This course introduces causal inference methodology when randomized trials are not feasible. The courses focuses on the use of epidemiologic studies, electronic health records and other big data sources for comparative effectiveness and safety research. Key concepts of bias (confounding, selection bias, measurement bias) are described via causal diagrams. Methods for confounding adjustment (stratification, outcome regression, propensity scores, matching, and standardization) are introduced along with an emphasis on formulating well-defined questions in clinical research. The course emphasizes critical thinking and practical applications, including assignments based on articles published in medical journals. All methods are taught along with Stata software to implement them.
**Clinical Data Science: Comparative Effectiveness Research II**  
*(Module Directors: Miguel Hernan, MD, MPH, ScM, DrPH and Brian Healy, PhD)*  
This course extends the topics introduced in Comparative Effectiveness Research I.  
The course covers efficient epidemiologic designs (case-control, case-cohort, case-crossover), advanced methods for confounding adjustment (inverse probability weighting, parametric g-formula) for the comparison of sustained treatment strategies, and instrumental variable estimation. The course also covers techniques for the secondary analysis of randomized clinical trials in the presence of deviations from protocol. The course emphasizes critical thinking and practical applications, including assignments based on articles published in medical journals. All methods are taught along with Stata software to implement them.  

**Ethics and the IRB**  
*(Module Directors: Susan Kornetsky, MPH and Pearl O’Rourke, MD)*  
This course reviews some common challenges in the conduct of patient-oriented research. Lectures examine the history and evolution of ethical codes and regulations; the role and responsibility of physicians as investigators; the preparation of research protocol applications and informed consent documents; and the challenges of conducting research involving children and adolescents.  

**Clinical Trials**  
*(Module Director: Scott Solomon, MD and Julie Buring, MD)*  
This course focuses on how to conduct clinical trials effectively. The course content includes lectures on study design and implementation, including different designs, endpoints, study protocol, study population, recruitment, baseline assessment, randomization, stratification, and blinding. Other key issues that are covered include data analysis and sample size and power, treatment regimens and follow-up procedures, and monitoring and interim analysis plans. Lastly, other areas covered include data management and ethical issues, including protection of human subjects.  

**Genetic Epidemiology**  
*(Module Director: Benjamin Raby, MD, CM)*  
The goals of this course are to provide clinical researchers with the skills to: address opportunities to incorporate genetic studies to answer specific research questions; understand basic genotyping techniques; understand the basics of genetic study design and analysis; identify and use publically available databases for genetic research; and understand the principles of ethical conduct of genetic research.  

**Scientific Communication**  
*(Module Director: Caren Solomon, MD, MPH and Sushrut Waikar, MD, MPH)*  
This course is designed to develop skills in writing research proposals and manuscripts as well as communicating information effectively in poster and oral
presentations. How to write each section of a research proposal, the unwritten rules of earning top scores in grant submissions, as well as how to publish papers in high impact journals are also covered.

**Drug Development and Safety**  
*(Module Director: Priya Singhal)*  
This course will include topics such as: How are Drugs Discovered and Developed, Case Study of the Pre-clinical Stages of Drug Development, Moving a Compound through the Drug Development Process, Good Manufacturing Practices--a Global Perspective, and Overview of Diagnostic Device Development.

**Leadership and Management**  
*(Module Director: Ajay Singh MBBS, MBA, FRCP(UK), and Ranjay Gulati, BA, BS, SM, PhD)*  
This course examines different aspects of working with, managing and leading a team. Lectures will discuss the skills and techniques that are needed to manage a talented group of people effectively, pilot successful collaborations within and outside a group, navigate the complexities of the institution, and manage the inevitable conflicts that arise in a high-stakes environment.

**Longitudinal Seminar Series**  
*(Module Directors: Ajay Singh MBBS, MBA, FRCP(UK) and Finnian Mc Causland, MBBCh, MMSc, MRCPI)*  
The longitudinal seminar series is designed to complement the didactic and ROL curriculum by placing the learned theory in the context of real-world examples of successful clinical research projects. The second major focus of this series is to provide a regular platform for students to present updates to their individual research projects to their peers for the purpose of receiving constructive feedback and advice.

**Mentored Research Experience**  
All students are required to complete a thesis at the end of the mentored research experience. The thesis requirements must be completed under the direct supervision of a thesis committee which consists of the student, the primary mentor, one external member (i.e. someone who is not in the student’s primary laboratory and who is not directly involved in the student’s research) and a MMSCI program representative.

**D. Expectations for students by term or year**

Students are expected to participate fully in the required components of the program, including the three workshops and any pre-workshop mini-courses, the flipped classroom series, the longitudinal seminar, and the mentored research project.
Students will be formally evaluated in each course, through participation, online quizzes and homework assignments, team projects and written work. Attendance is required for all course meetings.

While the MMSCI will be a complete self-standing program of study that meets all of the credit requirements for matriculation of students, MMSCI enrolled students will be able to enroll in courses at other Harvard Schools, with the permission of those schools, and the guidance and permission of the program director, their research mentor, and relevant course directors. With respect to elective cross-registered courses, students are notified that they are expected to abide by the policies that apply to the course/school in which the elective is taken (including attendance and integrity in science) and are informed that they must receive a satisfactory grade in any for-credit elective in order to graduate, since any unsatisfactory grade on a student’s transcript precludes him/her from receipt of a diploma.

Students conduct mentored research in their mentored research laboratories beginning in August of the first year. Students meet with the program director at least once during each academic year. Students must meet regularly (4 times over the two-year period) with their thesis committees and submit progress reports on each occasion. The thesis committee will be comprised of the primary research mentor, a content mentor approved by the MMSCI program leadership and a MMSCI program representative. The program representative is responsible for ensuring that the student is meeting the program requirements.

E. Mentored research

All students are required to complete a thesis at the end of the mentored research experience. The research is conducted at an HMS-affiliated hospital, where the student’s HMS faculty mentor maintains principal responsibility for the conduct of all aspects of the research. With occasional exception, it is desirable that all mentors are at the assistant professor or higher rank. Prospective mentors are reviewed and approved by the program to ensure an appropriate research and training environment. Based on the individual student’s needs and objectives, and with the approval of the MMSCI Program, his/her research may be conducted in collaboration with faculty from other entities within or outside Harvard University; however, the HMS faculty mentor remains fully responsible for oversight of the student’s research project.

The thesis requirement options are: (1) two first-author manuscripts of original research that are submitted to a peer-reviewed journal; or (2) an extensive document describing the body of work completed by the student during matriculation. Students are required to give a public presentation of their work (i.e., oral thesis defense). Approval of the thesis and oral thesis defense by the student’s thesis committee is a requirement for completing the program.
The thesis requirements must be completed under the direct supervision of a thesis committee, consisting of the primary mentor, one external content member (i.e. someone who is not in the student’s primary laboratory and who is not directly involved in the student’s research) and a MMSCI program representative. The names and contact information for the thesis committee members must be approved by the Program Director prior to the commencement of the mentored research experience.

The thesis committee is required to meet four times throughout the two-year program, with the final meeting consisting of the public oral thesis defense. The student is responsible for coordinating each progress meeting and for submitting a progress report to the Program Director after the completion of each meeting. The presence of an external expert in the student’s area of research is required at the public oral thesis defense.

Upon completion of the oral thesis defense and approval of the thesis, the student is required to upload a pdf of the thesis on the Harvard University DASH database via the Electronic Thesis and Dissertation platform. A copy of the thesis is archived in print form in the Countway Library. (See Section 3.11 for information on the DASH system.)

F. Assessment

The grading system for courses is determined by the School in which the course is offered. For program courses based at HMS, the SAT/UNSAT system is used. Satisfactory is defined as a numeric score of 80 or better. Students are evaluated throughout each program course through regular homework assignments, online quizzes, class participation, and team-based projects that are presented orally and in written form. Students receive a final grade for each module they take. This will take the form of satisfactory or unsatisfactory rating. Students taking courses in other programs or schools will be evaluated as determined by that program or school. A student must have the equivalent of a satisfactory grade for all courses to maintain satisfactory academic progress.

Longitudinal evaluation of each student is required during the course of the program, which includes course grades with narrative and/or oral feedback on a variety of exercises or projects and may also include a mid-term examination. The student’s mentored research project is evaluated at least three times during a student’s tenure, and these reviews are written and submitted to the Program Director.

Students are expected to achieve satisfactory grades in all courses and the mentored research project.
G. Length of Time to Degree

MMSCI students are expected to complete the MMSc degree program in two academic years. Students may petition the Program Director in writing for an extension of time. (See Section 2.06 for definitions of full- and part-time.)

H. Requirements for graduation

Satisfactory completion of all required courses and any elective courses and successful completion of the thesis and oral thesis defense are required for graduation. A degree will not be granted to a student who is not in good standing or against whom a disciplinary charge is pending. In addition, a student’s term bill must be paid in full before he/she will be awarded the degree.

VI. Advising

Each student will be assigned an academic program advisor separate from the research. The role of the program advisor is to provide the student with guidance on the academic requirements and with independent career and research counseling. The program advisor meets with the student at least annually and as part of the thesis committee. Students may also meet individually with the Program Director once per academic year for career guidance and support.

The program annually convenes a Mentorship Advisory Committee (MAC) comprised of faculty from the major HMS-affiliated hospitals and chaired by the Program Director. The MAC oversees student progress and ensures that each student has the necessary resources to successfully complete the program. The MAC reviews each student’s research program, progress in the academic requirements, and plans for grant submissions and career development.

VII. Financial Aid

Program applicants are encouraged to apply for external grants and fellowships whenever possible.

MMSCI has limited scholarship resources available through discretionary resources. Application for program scholarship support is made directly to the Program Director.

Students who are enrolled at least half-time may be eligible for other federal or private aid. See Section 6.07 for additional financial aid information.
Global Health Delivery

I. Background and Overview of Program

Over the past decade, governments, health professionals, and philanthropists have made an unprecedented commitment to provide effective health care to populations worldwide. This commitment has transformed the delivery of health care to the world’s poor. No longer do international health campaigns limit themselves to population-based prevention programs. Instead, new global health campaigns deliver complex medical care, such as treatment for AIDS or cancer, to people living in the most difficult and impoverished settings, with attention not just on overseas sites but also on resource-poor settings within the United States. The emerging discipline of Global Health Delivery can now be defined as the design, implementation, and evaluation of systems that deliver both preventive and curative care to the world’s most vulnerable populations.

Global health programs face many challenges. One is the need to train health professionals who have the skills required to produce and evaluate rigorous evidence about the best methods to manage the global burden of disease, the social determinants of disease, and the structural barriers to care that result in poor health. Another is the need to train health professionals who can take this knowledge and apply it to the design, implementation, and evaluation of innovative health delivery systems. A third is the dissemination of best practices in global health delivery. As global health programs have scaled up over the past decade, it has become clear that there are too few trained health professionals who can administer such programs, let alone conduct the scholarship needed to develop standards and best practices for care delivery in resource poor settings.

The prospects for improving the quality of medical care in resource poor settings and for conducting needed scholarship about it have increasingly inspired a new generation of physicians and students. Many people from developed and developing countries want to support the effort to deliver quality medical care and define the discipline of Global Health in the decade to come. The Master of Medical Sciences in Global Health Delivery (MMSc-GHD) at Harvard Medical School seeks to meet this need.

Mission Statement and Goals and Objectives

The MMSc-GHD provides training in the design, implementation, evaluation, and improvement of health programs in resource poor settings. By taking a scholarly approach to the problem of health care delivery in these settings, it generates (1) an expanded body of knowledge about the prevention and treatment of disease, (2) a framework for defining the best practices for the implementation of medical programs, and (3) strategies for overcoming the translational barriers that now exist. The program uses systematic approaches (e.g., qualitative, quantitative, decision analysis) to produce evidence and analyze the factors associated with the integration of effective interventions into particular practice settings. This contributes to current efforts to develop the field of implementation research. Succeeding at this requires an appreciation of how to design and implement programs, how to monitor them and measure their impact, and how to
disseminate best practices. This mix of knowledge from the social and clinical sciences has not been taught comprehensively in existing graduate programs.

The MMSc-GHD fulfills these objectives by combining a rigorous HMS-based curriculum with an 8-month mentored research project at a global health program. The coursework, both didactic and case-based, gives students an overview of how global health programs are designed, implemented, and evaluated. Courses in quantitative methods, qualitative methods, monitoring and evaluation, ethics, and interpretive social sciences enable students to assess the clinical needs of populations, the feasibility and acceptability of different delivery programs, and the effectiveness of those programs. The mentored project gives students significant hands-on experience and allows them to participate in the design, conduct, and evaluation of an innovative clinical program. The students’ work will not just develop their skills in global health delivery and contribute to a growing knowledge base. It will also contribute to the quality of the health care systems in which they work and enhance the training available to local clinical staff.

The MMSc-GHD appeals to a wide range of students, including: medical students; students in other health-related graduate programs; residents, fellows, and other clinicians in training; and mid-career clinicians and professionals seeking new training to develop their careers in global health. A slightly modified track allows HMS medical students to complete a combined MD/MMSc in five years. The program seeks a balance between students from Harvard, elsewhere in the United States, and abroad. The long-term success of the program depends on its ability to include students and clinicians from resource poor settings worldwide. The program will contribute to the development of a trained cadre of global health professionals. Graduates are prepared to pursue careers in health care delivery, clinical research, and global health policy. They should become the next generation of innovators and leaders in global health care delivery.

II. Degree(s) Offered

The Master of Medical Sciences in Global Health Delivery is offered as a 68-credit program that may be completed full-time or part-time or a 59-credit, full-time program that is part of the dual degree MD-MMSc program. The 68-credit, full-time program is offered over two academic years; the 59-credit program is one year with additional work required during the fourth medical student year as part of the Scholars in Medicine medical student requirement. The 68-credit, part-time program is offered over three academic years. See Section 2.06 for definitions of full- and part-time.

III. Prerequisites for Admission

In order to apply for the MMSc in GHD, applicants must have received an undergraduate degree and must have had two years of experience in health care delivery in a resource-poor setting. While many applicants have attained a clinical degree, a clinical degree is not required to apply to the MMSc-GHD program.
Applicants must submit the following application materials:

- Online application
- Statement of Purpose
- Curriculum Vitae
- Undergraduate and graduate transcripts
- Three letters of reference

In addition, applicants for whom English is not the native language, and who did not receive their bachelor’s and doctoral degrees from an institution where English is the language of instruction, must take the TOEFL or IELTS. The MMSc-GHD program requires a minimum score of 80 on the TOEFL and/or a 7.5 on the IELTS.

Applications open in August of each year, with a deadline in November. The Admissions Review Committee convenes in November to make final decisions on admissions. Accepted applicants are invited in December, and individuals are enrolled through the Registrar’s Office for July matriculation.

IV. Academic Residence Requirements

The MMSc in Global Health Delivery requires that the didactic coursework from July-May of the first program year take place on Harvard's campus (HMS or other Harvard Schools). The mentored research project may be conducted either on campus, at an HMS-affiliated hospital, or elsewhere with HMS faculty supervision.

V. Course of Study

A. Concentrations offered

There are no concentrations offered at this time.

B. Curriculum by term (see tables below)

The program begins in July of the first year at the Harvard T.H. Chan School of Public Health. Students take courses in July and August. The fall semester runs from September through December.

The spring term begins in January; courses end in May and students begin their mentored research projects in June, working from June through January of the next calendar year.

Students return to Boston in February of the second year of the program. They then work on final analysis and write-up of their projects in February and March, defend and submit their theses in April, and graduate in May.
### Master of Medical Sciences, 68-credit program

#### Year 1

<table>
<thead>
<tr>
<th>Term</th>
<th>School/course ID</th>
<th>Faculty</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summer Session of Fall Term</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epidemiologic Methods for Global Health</td>
<td>HSPH EPI 505</td>
<td>Mary Kay Smith-Fawzi</td>
<td>2</td>
</tr>
<tr>
<td>Management Practices in Global Health Delivery</td>
<td>HSPH GHP 555</td>
<td>Rebecca Weintraub</td>
<td>1</td>
</tr>
<tr>
<td>Introduction to Global Health Delivery</td>
<td>HSPH GHP 532</td>
<td>Joseph Rhatigan</td>
<td>2</td>
</tr>
<tr>
<td>August</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent Study on project</td>
<td>HMS GH 700</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td><strong>Fall</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualitative Methods for Global Health</td>
<td>HMS GH 701</td>
<td>Norma Ware</td>
<td>4</td>
</tr>
<tr>
<td>Quantitative Methods</td>
<td>HSPH ID 201 or equivalent</td>
<td>Kimberlee Gavreau</td>
<td>6</td>
</tr>
<tr>
<td>Social Medicine Seminar</td>
<td>HMS GH 711</td>
<td>Joia Mukherjee, Paul Farmer, Salmaan Keshavjee, Giuseppe Raviola, Jason Silverstein</td>
<td>4</td>
</tr>
<tr>
<td><strong>Elective</strong></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td><strong>Spring</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mixed Methods for Global Health Research</td>
<td>HMS GH 706</td>
<td>Carole Mitnick, Mary Kay Smith Fawzi</td>
<td>4</td>
</tr>
<tr>
<td>Conceptual and Practical Ethical Problems in Global Health Delivery</td>
<td>HMS GH 705</td>
<td>Sadath Sayeed</td>
<td>4</td>
</tr>
<tr>
<td>Ethnographic Methods for Global Health</td>
<td>HMS GH 708</td>
<td>Byron Good, Mary Jo DelVecchio-Good</td>
<td>4</td>
</tr>
<tr>
<td><strong>Elective</strong></td>
<td></td>
<td></td>
<td>4</td>
</tr>
</tbody>
</table>

#### Year 2

<table>
<thead>
<tr>
<th>Term</th>
<th>School/course ID</th>
<th>Faculty</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall and Spring</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On site project for MMSc-GHD (June-January)</td>
<td>HMS GH 912</td>
<td>Project mentor</td>
<td>32</td>
</tr>
</tbody>
</table>

---

### Master of Medical Sciences as part of combined MD-MMSc program, 59-credit program

#### Year 1

<table>
<thead>
<tr>
<th>Term</th>
<th>School/course ID</th>
<th>Faculty</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summer Session of Fall Term</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epidemiologic Methods for Global Health</td>
<td>HSPH EPI 505</td>
<td>Mary Kay Smith-Fawzi</td>
<td>2</td>
</tr>
<tr>
<td>Management Practices in Global Health Delivery</td>
<td>HSPH GHP 555</td>
<td>Rebecca Weintraub</td>
<td>1</td>
</tr>
<tr>
<td>Introduction to Global Health Delivery</td>
<td>HSPH GHP 532</td>
<td>Joseph Rhatigan</td>
<td>2</td>
</tr>
<tr>
<td>August</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent Study on project</td>
<td>HMS GH 700</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td><strong>Elective</strong></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td><strong>Fall</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ethical Basis of Public Health</td>
<td>HSPH ID 250</td>
<td>Nir Eyal</td>
<td>2</td>
</tr>
<tr>
<td>Qualitative Methods for Global Health</td>
<td>HMS GH 701</td>
<td>Norma Ware</td>
<td>4</td>
</tr>
<tr>
<td>Course</td>
<td>Credits</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>------------------------------------</td>
<td>---------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Required core courses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>HSPH EPI 505 Epidemiological Methods for Global Health</strong> (2 credits): Mary Kay Smith Fawzi</td>
<td></td>
<td>The course covers introductory level epidemiology and a biostatistics primer introducing basic principles of statistics, with a specific focus on problems related to global health. Students who take this course fulfill the introductory level course requirement in epidemiology; however, the course does not fulfill a course requirement for biostatistics. A key difference in this course compared with other introductory level courses in epidemiology is that it offers examples from global health to illustrate epidemiologic methods and describe statistical approaches used. At the conclusion of the course, students will have gained an understanding of how to apply basic epidemiologic methods to evaluate global health programs and to critically analyze literature focused on global health problems for the purpose of advancing program design and service provision that is evidence-based.</td>
<td></td>
</tr>
<tr>
<td><strong>HSPH GHP 532 Introduction to Global Health Delivery</strong> (2 credits): Joseph Rhatigan</td>
<td></td>
<td>This course engages students in the analysis of Harvard case studies that describe efforts to improve health care delivery in resource-poor settings. Classroom discussion of these cases illuminates principles and frameworks for the design of efficient and effective global health interventions.</td>
<td></td>
</tr>
<tr>
<td><strong>HSPH GHP 555 Management Practices in Health Care Delivery</strong> (1 credit): Rebecca Weintraub</td>
<td></td>
<td>The course educates students in the fundamental principles of organizational behavior, strategy, operations management, leadership and financial accounting relevant for work in leading global health programs.</td>
<td></td>
</tr>
<tr>
<td><strong>HMS GH 701 Qualitative Methods for Global Health</strong> (4 credits): Norma Ware</td>
<td></td>
<td>This course integrates formal presentations, readings, and practical learning experiences to provide students with an understanding of and basic competencies in qualitative methods for global health research. Students attend weekly class sessions, complete required readings, and participate actively in discussions, class exercises, and/or supervised field experiences. These activities recapitulate the research trajectory to provide students with necessary skills for carrying out or contributing to a qualitative research project. Examples of specific course topics include: (a) formulating a research question; (b) study design; (c) qualitative research interviewing; (d) research ethics; (e) data preparation and management; (f) analysis of qualitative data; and (g) writing up research results. Students will complete and present a final project. Research in low-income international settings will be emphasized.</td>
<td></td>
</tr>
</tbody>
</table>
HMS GH 711 Social Medicine Seminar (4 credits): Joia Mukherjee, Paul E. Farmer, Salmaan Keshavjee, Giuseppe Raviola, Jason Silverstein
Through lectures and case-based discussions, this course examines a collection of global health problems rooted in rapidly changing social structures that transcend national and other administrative boundaries. Students will explore case studies (addressing AIDS, tuberculosis, mental illness, and other topics) and a diverse literature (including epidemiology, anthropology, history, and clinical medicine), focusing on how a broad biosocial analysis might improve the delivery of services designed to lessen the burden of disease, especially among those living in poverty.

HSPH ID 201 - Core Principles of Biostatistics and Epidemiology for Public Health Practice (7 credits): Kimberlee Gauvreau and Nina Paynter
This course will provide an introduction to the methods of biostatistics and epidemiology in the context of public health and clinical research. The focus will be on applications, providing students with the skills necessary to critically interpret issues related to study design and data analysis in the public health literature. The computer is used throughout the course. Lectures are complemented by seminars and weekly lab sessions. Topics include measures of frequency and association, study designs, bias, confounding, screening tests, probability distributions, estimation and statistical inference, sample size estimation, and regression methods.

Students may substitute an equivalent course of at least 4 credits for quantitative methods with permission.

HMS GH 706 Mixed Methods in Global Health Delivery (4 credits): Carole Mitnick, Mary Kay Smith Fawzi
This course builds on material already covered in courses on quantitative and qualitative methods to provide an integrated perspective on research design and execution for implementation research, especially use of both qualitative and quantitative methods to analyze outcomes at different scales (whether clinical, institutional, or community).

HMS GH 705 Conceptual and Practical Ethical Problems in Global Health Delivery (4 credits): Sadath Sayeed
This course examines foundational normative problems and pragmatic ethical challenges facing those who work in some capacity to improve health outcomes for very poor populations living under conditions of severe resource scarcity. We interrogate basic conceptual ideas such as “what do we mean by ‘global health equity’?” and the nature and root sources of “resource scarcity”, in addition to focusing on specific practical concerns such as 1) how to conduct ethical responsible research on and with socially and economically disadvantaged and vulnerable populations, 2) macro-economic and micro-bedside resource allocation dilemmas, and 3) health care worker “brain drain” from poor to rich locales.

The course meets in a once per week seminar for 3 hours for 14 weeks. Discussions are primarily student-led and based on substantial weekly reading assignments and a minimum of 4 major writing assignments throughout the semester.

MD/MMSc-GHD students would take HSPH ID 250 in the fall instead of GH 705.
HSPH ID 250 Ethical Basis of Public Health (2 credits): Nir Eyal
This course provides students with a broad overview of some of the main ethical debates in public health policy. The course helps students develop their own capacities to analyze, criticize, evaluate, and construct policy-oriented arguments, introducing utilitarianism and competing moral theories and the strengths and weaknesses of each. Students in this course will survey some of the principal ethical controversies in contemporary public health. An overarching question will be “Why not utilitarianism --for example, why not prioritize those likeliest to survive during mass casualty?” “Why not simply maximize QALYs when deciding which drugs to fund?” “Why not use coercive or paternalistic policies whenever they would promote health?” Since public health focuses on the health of populations, not individual healthcare, these controversies differ from familiar controversies in clinical bioethics, and bear resemblance to ones in political philosophy and economics. The instructors, an economically-trained physician and a philosopher, will explore this newer field along with the class. Topics discussed in the course include: * Introduction and ethical dilemmas of disaster triage * The notion of population-level bioethics * Utilitarianism and other moral theories * Universal coverage in low- and middle-income countries * Priority setting in public health * Inequality and Health * Personal responsibility for health * Rosea’s Paradox: Prevention or Treatment * Burden of disease: ethical issues * Distributing human resources for health * Paternalistic public health policy * Medical surveillance and privacy * Issues in vaccination * Theories of justice and health.

HMS GH 708 Ethnographic Methods for Global Health Research (4 credits): Mary Jo DelVecchio-Good, Byron Good, Eric Henderson
This course is intended as an introduction to ethnographic methods for use in global health research. The course provides guided experiences in ethnographic observation, “participant observation,” and writing of field notes, in anthropological interviewing, development of interview guides, the design of studies in global health research that include an ethnographic component, and analysis of ethnographic data and ethnographic writing. Special attention is given to interviewing as a tool of ethnographic research and theories of subjectivity that underlie our understandings of interviewing. The course provides practical experiences in carrying out interviews, with class supervision and group reflection on interviewing experiences, along with readings aimed at providing students understanding of how data and theory are combined in ethnographic writing. But attention is also focused on ethnographic observation and the juxtaposition of interview and observational data. Students are required to review ethnographic writing relevant to the topic and setting of their research. Because medical anthropology has been such a central component for many of the faculty in the Department of Global Health and Social Medicine, the course provides an introduction to the meaning of ethnography and ethnographic research as used in diverse subfields of global health research. In particular, since global health research is conducted in settings in which local culture, forms of inequality, health care institutions, and ways of interpreting and experiencing illness are of critical importance to the development of health services, the course focuses on the use of ethnography to address these basic dimensions of local settings in which research is being conducted.

D. Expectations for students by term or year
Students must complete the requirements for courses and projects as shown in the schematic above in II. Degree(s) Offered and described in E. Mentored research project below.

E. Mentored research
The mentored research project will be chosen according to the interests of the students and the needs of the various global health sites, as well as the availability of a mentor within HMS who is able to advise a student on the thesis topic. Theses might involve something as preliminary as a needs assessment and program design or something as ambitious as the
implementation and evaluation of a clinical or infrastructural innovation. Students will begin developing their theses during August of the first year. The fall program seminar and qualitative methods class will allow them time to further develop their thesis proposal. In the spring of their first year, students will finalize their thesis project and obtain approvals from the relevant (HMS and local) IRBs. Once the spring term has ended, students will return to the field site for the summer session of the Fall term, Fall, and January session to conduct the project under the guidance of the local mentor, with continuing input from Boston-based faculty.

Students will present their research proposals at the end of Year 1. Their thesis advisory committees will provide formal feedback at that time. Progress on the research project will be monitored in real-time by the on-site research mentor, and then again by the thesis advisory committee towards the end of the field work. All students will submit and defend their theses in the spring of Year 2; this will form the basis of the final evaluation of the research project.

A successful thesis will be one approved by the student’s mentor and the MMSc-GHD faculty director and that contributes to the field of global health. This thesis should be work that could be translated into either a journal article or a grant proposal.

Upon completion of the oral thesis defense and approval of the thesis, the student is required to upload a pdf of the thesis on the Harvard University DASH database via the Electronic Thesis and Dissertation platform. A copy of the thesis is archived in print form in the Countway Library. (See Section 3.11 for information on the DASH system.)

F. Assessment

GHD uses grades of SAT/UNSAT for its courses. Satisfactory is defined as a numeric score of 80 or better.

Students are expected to achieve satisfactory grades in all courses and the mentored research project.

G. Length of Time to Degree

GHD students are expected to complete the MMSc degree in two academic years if completing the program on a full-time basis and three years if on a part-time basis. Those student enrolled in the dual degree MD-MMSc program are expected to complete the MMSc year in one year with additional work required in the fourth MD year. Students may petition the Program Director in writing for an extension of time. (See Section 2.06 for definitions of full- and part-time.)

H. Requirements for graduation

Granting of the Master of Medical Sciences degree requires satisfactory completion of the following program components:
• Successful (satisfactory) completion of the didactic courses and required seminars
• Completion of a mentored research project
• Submission of an acceptable thesis document for committee review
• Presentation of an oral thesis defense

The final decision regarding a student’s readiness to graduate will be made by the program administrative review committee of the MMSc-GHD Program. A degree will not be granted to a student who is not in good standing or against whom a disciplinary charge is pending. In addition, a student’s term bill must be paid in full before s/he will be awarded the diploma.

VI. Advising

All students will have an academic advisor, separate from the research mentor, who will monitor their progress throughout the program. In the spring term of the first year, students will convene a thesis advisory committee. This will include: (1) a member of the HMS faculty with relevant expertise; (2) an appropriate supervisor at the local site; and (3) a third faculty member of the student’s choice. This advisory committee will assess the student’s progress at three points in the program: the proposal defense at the end of Year 1; in December or January of Year 2; and at the thesis defense at the end of Year 2.

VII. Financial Aid

The MMSc-GHD program has limited scholarship aid available through GHSM fundraising efforts. Application for scholarship support is made directly to the Program Director.

Students who are enrolled at least half-time may be eligible for other federal or private aid. See Section 6.07 for additional financial aid information.

IMMUNOLOGY

I. Background and Overview of Program

The Master of Medical Sciences in Immunology (MMSc IMM) has a close relationship with the Harvard PhD in Immunology program, and shares its faculty members.

The mission of the MMSc IMM is to provide a solid instructional and research-based foundation in both basic and clinical immunology. Courses start with the fundamentals and rapidly progress to cutting-edge knowledge, all taught by faculty members in the Program in Immunology at Harvard. This program serves the needs of students with a strong undergraduate biology background with an interest in medicine and seeking deeper knowledge of immunology as well as the needs of academic physicians from a range of specialties who seek an in-depth knowledge of Immunology in order to further their professional goals and research expertise.
II. Degree(s) Offered

The Master of Medical Sciences in Immunology is offered; this is a 64-credit program to be completed on a full-time basis. On a case-by-case basis, a part-time option for the 64-credit program and a full-time, 56-credit program that is part of the dual degree MD-MMSc program will be considered. Prospective students should discuss these options with the Program Director during the application process. See Section 2.06 for definitions of full- and part-time.

III. Prerequisites for Admission

In order to apply for the MMSc in Immunology, applicants must have a Bachelor’s degree with a strong background in biology and have an interest in immunology, medicine, or biomedical research. The program is also open to individuals who already possess a medical degree, such as an MD, a DO or an MBBS, or to individuals who have a degree in a health professions-related field.

Applicants must submit the following application materials:

- Online application
- Letter of Interest
- Curriculum Vitae
- Undergraduate and graduate transcripts
- Three letters of reference

For applicants with only a BA or BS degree, GRE or MCAT test scores are also required.

In addition, applicants for whom English is not the native language, and who did not receive their bachelor’s and doctoral degrees from an institution where English is the language of instruction, must take the TOEFL or IELTS. The MMSc-IMM program requires a minimum score of 100 on the TOEFL; the IELTS is accepted on a case by case basis.

Applications are open in November of each year, with a deadline date in early May for domestic students and March for international students. The Admissions Review Committee convenes immediately after the application deadline to make final decisions on admissions. Accepted applicants are invited shortly thereafter, and individuals are enrolled through the Registrar’s Office for September matriculation.

IV. Academic Residence Requirements

The MMSc in Immunology requires that all didactic coursework and mentored and thesis research take place on Harvard’s campus (HMS or other Harvard Schools) or at an HMS-affiliated hospital.
V. Course of Study

A. The program currently does not offer concentrations.

B. Curriculum by term

**Fall Term Year 1:**

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>IM702.0</td>
<td>Principles of Immunology</td>
<td>4</td>
</tr>
<tr>
<td>MCB 169</td>
<td>Molecular and Cellular Immunology</td>
<td>4</td>
</tr>
<tr>
<td>IMM701.0</td>
<td>Methods in Basic and Clinical Immunology</td>
<td>4</td>
</tr>
<tr>
<td>IMM703.0</td>
<td>Deconstructing Immunology Presentations</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>16</strong></td>
</tr>
</tbody>
</table>

**Spring Term Year 1:**

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>IM712.0</td>
<td>Advanced Principles of Immunology</td>
<td>4</td>
</tr>
<tr>
<td>IMM701.0</td>
<td>Methods in Basic and Clinical Immunology</td>
<td>4</td>
</tr>
<tr>
<td>IMM703.0</td>
<td>Deconstructing Immunology Presentations</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Electives</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>16</strong></td>
</tr>
</tbody>
</table>

Year 2 (32 credits)

In Year 2 students will primarily devoted to:

Mentored Research, including analyzing data and writing and defending the thesis.

C. Course descriptions

**IM702.0**  
**Principles of Immunology**  
**Credits:** 4.00 CREDITS (Required)  
**Sites:** HMS  
**Directors:** Mempel, Thorsten, Carroll, Michael, Von Andrian, Ulrich  
**Prerequisites:** A background in genetics and biochemistry strongly recommended.  
**Offered:** Fall.  
**Time:** 8/31/2016–12/01/2016; TU-TH; 1:30-3:00 PM, with section TU-TH, 3:00-4:00 PM  
**Location:** Jeffrey Modell Center, Room 100A  
**Open to Exclerks:** No (HMS only)  
Cross listed with GSAS as Immun 201.

**MCB 169**  
**Molecular and Cellular Immunology**  
**Credits:** 4.00 CREDITS (Required) **Harvard College/GSAS: 2518**
Directors: Shiv S. Pillai
Time: Fall 2014-2015
Location: Biological Labs 1080 (Main Lecture Hall)
Meeting Time: Tu., Th., 10-11:30, and a 90-minute section to be arranged.
Exam Group: 12

IMM701.0
Methods in Basic and Clinical Immunology
Credits: 8.00 CREDITS (Required)
Directors: Carroll, Michael C, Shiv S Pillai
Time: 09/12/2016- 05/01/2017
Location: JEFFREY MODELL IMMUNOLOGY CENTER, CLASSROOM 100A
Open to Exclerks: No (HMS only)
Grade Criteria: Letter

IMM703.0
Deconstructing Immunology Presentations
Credits: 8.00 CREDITS (Required)
Directors: Pillai, Shiv S, Michael Carroll
Offered: Year Long
Time: 09/02/2014- 04/28/2017
Location: JEFFREY MODELL IMMUNOLOGY CENTER, CLASSROOM 100A
Open to Exclerks: No (HMS only)
Grade Criteria: Letter

IM712.0
Advanced Principles of Immunology
Credits: 4.00 CREDITS (Non-Clinical Elective)
Sites: HMS
Directors: Swirski, Filip, Pittet, Mikael
Prerequisites: Course requirements: Immunol 201 or its equivalent
Offered: Spring
Time: TBA
Location: JEFFREY MODELL IMMUNOLOGY CENTER, CLASSROOM 100A
Open to Exclerks: No (HMS only)
Offered jointly with GSAS as Immun 202

D. Expectations for students by term or year

Term 1:
1. Maintenance of a B average in course work
2. Preliminary selection of a research laboratory in consultation with Program Directors
Term 2:
1. Maintenance of B average in course work
2. Initiation of part time research in laboratory of choice
3. Selection of a thesis committee in consultation with Program Directors and mentor
4. Review of thesis project with Program Directors by end of term

Students will need to abide by policies (including attendance and integrity in science) of each school in which courses are taken.

E. Mentored research

There is the expectation of a solid body of work which may or may not represent a part or a whole of a publication. There is no formal expectation of a publication to graduate but the work must be performed by the student and a succinct presentation of the background, the question to be answered, the approaches taken, and the results obtained will need to be presented both orally during a defense and in a written thesis submitted at least two weeks before the defense. Defenses will be scheduled from March to early May of year two.

Upon completion of the oral thesis defense and approval of the thesis, the student is required to upload a pdf of the thesis on the Harvard University DASH database via the Electronic Thesis and Dissertation platform. A copy of the thesis is archived in print form in the Countway Library. (See Section 3.11 for information on the DASH system.)

F. Assessment

Immunology uses letter grades for its courses. The minimum standard for satisfactory work in the MMSc IMM is a B average. A grade of C is offset by a grade of A, and a D by two A’s; no account is taken of plus or minus. Grade of E is failing. A course in which a student receives an E can be retaken for credit at a later time, in which case both grades will appear on the student’s transcript. The pass/fail grading option is not available to MMSc IMM students.

G. Length of Time to Degree

Immunology students are expected to complete the MMSc degree in two academic years. Students may petition the Program Director in writing for an extension of time. (See Section 2.06 for definitions of full- and part-time.)

H. Requirements for graduation

- Overall B average for course work in year one
- Satisfactory progress as assessed by mentor and thesis committee
- Successful defense of thesis
A degree will not be granted to a student who is not in good standing or against whom a disciplinary charge is pending. In addition, a student’s term bill must be paid in full before he/she will be awarded a diploma.

VI. Advising

1. One-on-one meetings will be held every term with the Program Director to discuss progress
2. One feedback session per term with whole class
3. Thesis committee will meet twice in year two to assess progress

VII. Financial Aid

Students who are enrolled at least half-time may be eligible for other federal or private aid. See Section 6.07 for financial aid information.

Medical Education

I. Background and Overview of Program

The MMSc in Medical Education Program (MMSc Med Ed) is a 64-credit, research-focused degree program. The HMS MMSc Med Ed will ensure that learners develop both core teaching skills and a command of the foundational and emerging content in medical education. At its core, the HMS program focuses on research and innovation in medical education.

The mission of the program is to give those who already excel in one of the health professions or health sciences disciplines an opportunity to turn their specialized knowledge and skills toward the advancement of medical education itself. Through research, skill building, and innovation, the MMSc Med Ed seeks to transform medical education in the service of improving health sciences and healthcare nationally and internationally. Graduates of our program will be well-positioned to lead progress and make transformative change in medical education.

The HMS MMSc Med Ed is a 64-credit post-doctoral program with two primary goals:

1. To give students a solid foundation in medical education, teaching skills, and the science of learning.
2. To provide students with comprehensive tools and protected time to engage in mentored research on the most important issues in the field. Our research objective includes empirical work and hypothesis testing using quantitative and qualitative analysis.

We also ensure that as a core part of the program, students further their own skills as teachers. Graduates of MMSc Med Ed should be master teachers themselves, even as they focus on advancing the field of medical education.
II. Degree(s) Offered

The Master of Medical Sciences in Medical Education is offered. This is a 64-credit program that may be completed full-time or, on a case-by-case basis, part-time. The program also offers a full-time, 56-credit program that is part of the dual degree MD-MMSc program. The 64-credit, full-time program is offered over two academic years; the 56-credit program is one year full time with additional work required during the fourth medical student year as part of the Scholars in Medicine medical student requirement.

Student requests for part-time study are individually reviewed by program leadership and decisions are made on a case-by-case basis. See Section 2.06 for definitions of full- and part-time.

III. Prerequisites for Admission

In order to apply for the MMSc in Medical Education, applicants must have or be in the process of completing a terminal academic or professional credential, such as MD, MBBS, DO, PhD, or other doctoral degree in nursing, pharmacy, public health or other health professions-related field. While occasionally individuals without these credentials may have unusual qualifications that make them strong candidates for the program, these will be the exception rather than the rule.

Applicants must submit the following application materials:

- Online application
- Letter of Interest
- Curriculum Vitae
- Undergraduate and graduate transcripts
- Three letters of recommendation

In addition, applicants for whom English is not the native language, and who did not receive their bachelor’s and doctoral degrees from an institution where English is the language of instruction, must take the TOEFL. The MMSc program requires a minimum score of 100 on the TOEFL internet based test. Applicants who took the TOEFL more than three years ago must repeat the test. The program prefers applicants to submit scores from the internet-based test (IBT) of the TOEFL.

Applications are open in September of each year, please check out website for up to date application deadlines. The Admissions Committee convenes regularly during the application period to review candidates, conduct interviews, and make admissions decisions. Admitted individuals are enrolled through the Registrar’s Office for late August/early September matriculation.

IV. Academic Residence Requirements

The MMSc in Medical Education requires that the didactic coursework during the first program year take place on Harvard's campus (HMS or other Harvard Schools). The mentored research project, completed during the second year, may be conducted either on campus, at an HMS-
affiliated hospital, or elsewhere with HMS faculty supervision. Regardless of where a student chooses to complete the thesis, the program expects that 75-80% of the student's time is spent working on the thesis project.

V. Course of Study

A. There are no concentrations offered.

B. Curriculum

<table>
<thead>
<tr>
<th>Year One September-December</th>
<th>Year One January</th>
<th>Year One February-May</th>
<th>Year Two September - May</th>
</tr>
</thead>
<tbody>
<tr>
<td>MED701: Research in Medical Education (RIME) (4 credits)</td>
<td>Harvard Macy Program for Educators in Health Professions (2 credits)</td>
<td>Selective HGSE Course (4 credits)</td>
<td>Mentored Research Project (32 credits)</td>
</tr>
<tr>
<td>GH701: Qualitative Methods (4 credits)</td>
<td>Part 1 in January and Part 2 in May</td>
<td>Elective (4 credits)</td>
<td></td>
</tr>
<tr>
<td>Elective – HGSE Stats (4 credits)</td>
<td></td>
<td>Elective (4 credits)</td>
<td></td>
</tr>
<tr>
<td>Teaching 100: The Theory &amp; Science of Teaching (2 credits)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Longitudinal Seminar (4 credits)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Course descriptions

Core Courses

- **MED701.0: Research in Medical Education: Principles & Practice (RIME)** (4 credits)
  
  Credits: 4.00 CREDITS (Required)
  
  Directors: Ramani, Subha
  
  Grade Criteria: Satisfactory/ Unsatisfactory

- **GHD701.0: Qualitative Methods for Global Health** (4 credits)
  
  Credits: 4.00 CREDITS (Required)
  
  Directors: Ware, Norma Clara & Gilbert, Hannah
  
  Grade Criteria: Satisfactory/ Unsatisfactory

- **MED703.0: Longitudinal Seminar in Medical Education** (4 credits)
  
  Credits: 4.00 CREDITS (Required)
  
  Directors: Kesselheim, Jennifer Cohn
  
  Grade Criteria: Satisfactory/ Unsatisfactory

- **Teaching 100/Cell Biology 306qc: The Theory & Science of Teaching** (2 credits)
  
  Credits: 2.00 CREDITS (Required)
  
  Directors: Gutlerner, Johanna & Wood, Christopher
  
  Grade Criteria: Satisfactory/ Unsatisfactory

- **MED710.0: Macy Course: Program for Educators in the Health Professions** (1 credit)
  
  Credits: 1.00 CREDIT (Required)
  
  Directors: Armstrong, Elizabeth G.
  
  Grade Criteria: Satisfactory/ Unsatisfactory

- **MED712.0: Macy Course: Leading Innovations in Healthcare and Education** (1 credit)
  
  Credits: 1.00 CREDIT (Required)
  
  Directors: Armstrong, Elizabeth G.
  
  Grade Criteria: Satisfactory/ Unsatisfactory

- HGSE Selective Course (students choose one course of three options)
  
  - COURSES TBD
  
  Credits: 4.00 CREDITS (Required)
  
  Directors: [Variable]
  
  Grade Criteria: Letter/Ordinal
D. Expectations for students by year

**Year 1 (first half of program)**

The first half of the MMSc-Med Ed Program contains the didactic coursework. The program expects that students will fulfill 32 credits by enrolling in:

- MED701.0: Research in Medical Education: Principles & Practice (4 credits)
- GHD701.0: Qualitative Methods for Global Health (4 credits)
- MED703.0: Longitudinal Seminar in Medical Education (4 credits)
- Teaching 100: The Theory & Science of Teaching (2 credits)
- MED710.0: Macy Course: Program for Educators in the Health Professions (1 credit)
- MED712.0: Macy Course: Leading Innovations in Healthcare and Education (1 credit)
- One HGSE selective course, selected from a list of three (TBD) (4 credits)
- Three elective courses that accept students as cross-registrants, recommend fall elective course is statistics course at HGSE (12 credits)

Students may select elective courses from a comprehensive list of course offerings throughout the university. Given the rich offerings of relevant courses across the University, it is expected that each student, in conjunction with program leadership, will tailor the selection of these electives to his/her own educational needs. Students may only enroll in elective courses that accept cross-registrants for course credit. Auditing a course will not fulfill elective credits; students must be formally enrolled in a course to receive course credits.

Additionally, the program expects that students will actively participate in the development of a research project on a seminal topic in medical education. This will be achieved through required courses as well as participation in works-in-progress sessions, meetings with established and potential mentors, and regular meetings with program leadership.

*Attendance*

Students are expected to attend all course sessions and all program activities. See the Attendance Policy in Section 2.02.

Students are expected to inform the Program Director if they anticipate missing any sessions of the longitudinal seminar. The program does not allow a student to miss more than two sessions of the longitudinal seminar. While in the seminar, students are expected to actively participate in all course discussions and activities.

*Human Subjects Research Training*

All MMSc-Med Ed students must receive training in conducting human subjects research during their first year in the program (before they embark on research)—in connection with the longitudinal seminar. Students must submit a certificate of completion for this training in order to pass the longitudinal seminar.
Cross-Registration Policies
When cross-registered in a course at another Harvard School, students are expected to comply with the unique policies and procedures of the School and are expected to read each School’s handbook to find these policies.

Satisfactory Academic Progress
The program expects students to satisfactorily pass any course to receive credit toward the degree.

A student will be considered in good academic standing after the first year if he/she enrolls in the required courses listed above and receives a ‘B’ average in all courses. If a student is unable to complete all of the didactic courses during the first year of the program due to extenuating circumstances, he/she must seek approval from the Program Director to complete coursework during the second year of the program.

In addition to a ‘B’ average, a student is considered in good academic standing at the end of the first year if he/she made significant progress toward developing a research project that may lead to a publishable thesis. Specifically, each student must receive a pass from his/her individual thesis advisory committee (see section ‘E. Mentored Research’ below for more information on this committee) after completing a thesis confirmation meeting by the end of the first year in the program. The confirmation process will serve as a formal confirmation of the student’s ideas and a condoning of the student moving forward with the work.

In order to monitor academic progress, the program requests an Individualized Learning Plan (ILP) from students at regular intervals that may be shared with the student’s advisor(s), the Program Director, and if necessary, the Academic Progress and Review Board for the Master’s Programs and/or the Dean for Basic Science and Graduate Education. (See Section 2.17 for additional information on Satisfactory Academic Progress)

Year 2 (second half of program)
The second half of the MMSc Med Ed Program is devoted primarily to research. Students must complete 32 credits of mentored research in order to meet program requirements.

Attendance
The MMSc-Med Ed Program expects that all students engaged in the mentored research experience (either on campus or from afar) will come together twice to present their work, meet with program faculty, advisors, etc. We require students to be on campus for this in early December (at the end of the fall term) and again in late April or early May to defend their thesis before graduation.
**Satisfactory Academic Progress**

Students are considered to be in good standing during the second year of the program if they turn in all required thesis work on time, report to campus for scheduled check-ins, and satisfy all pre-specified benchmarks for project progress. (See Section 2.17 for additional information on Satisfactory Academic Progress)

Please see E. below for further information on the second year of the program and ‘Mentored Research.’

E. Mentored Research

In the first year of the program, students develop and refine a research project that will likely become their thesis project during the second year of the program. Students are given benchmarks for completing this process, including regular "works-in-progress" sessions in which students present their project ideas and receive feedback from faculty and classmates. Additionally, individual students meet regularly (1-3 times per semester) with the Program Director to ensure their project is on track. The program helps each student to craft an individualized team of mentors to allow the research to be successful.

During the first year, students will begin to convene a thesis advisory committee. This committee will include three members, of which at least two will have appointments at Harvard or at HMS-affiliated hospitals. The third member may be an external individual and may be from a student’s home institution, if desired. The primary thesis mentor(s) will be asked to attend thesis advisory committee meetings but will not serve on this committee. Rather, the committee is meant to be an unbiased group who can evaluate a student’s work. The compositions of each student’s committee will be approved by the Program Director during the first year.

During the second year of the master’s degree, students work on the thesis project for 75-80% of their time. Each student must convene his/her thesis committee at least twice during the second year, and a summary of each meeting will be kept in the student’s file. Ideally these meetings will occur at the end of the fall term (November/December) and the end of the spring term (April/May).

In the spring of the second year, students deliver a final presentation of their thesis to their thesis committee; they are expected to turn in the final thesis to their committee at least two weeks in advance of their scheduled presentation date. The thesis is expected to be of a length and overall format amenable to publication in the medical literature and should follow the guidelines set forth by HMS. At this meeting, the committee will formally evaluate the thesis and it’s suitability for graduation.

Students are expected to provide the program office with a copy of the thesis (in hard copy and/or electronically). Students are also required to upload a pdf of the thesis on the Harvard University DASH database via the Electronic Thesis and Dissertation platform. A copy of the thesis is archived in print form in the Countway Library. (See Section 3.11 for information on the DASH system.)
F. Assessment

Consistent with HMS grading, students enrolled in HMS courses will be graded on a SAT/UNSAT basis. Satisfactory is defined as a ‘B’ or better.

Cross-registrants are bound by the rules and regulations of the respective schools regarding grades, examination schedules, make-up exams and incomplete work. Grading and other regulations may vary from school to school. The HMS Registrar's Office receives grades from the cross-registered school's Registrar's Office. Negotiating grading options with faculty is not allowed. Students are responsible for learning the cross-registered school's grading policies. Questions regarding cross-registered school's grading policies should be directed to that school's Registrar's Office.

Grades awarded by the school offering the course are the grades of record on the student's official transcript. The grades are included as part of the student's official academic record. These grades are not translated into HMS's unique grading system. Cross-registered courses and resulting grades will appear on student transcripts.

Students are expected to achieve satisfactory grades in all courses and the mentored research project.

G. Length of Time to Degree

Medical Education students are expected to complete the MMSc degree in two academic years if completing the program on a full-time basis and three years if on a part-time basis. Those students enrolled in the dual degree MD-MMSc program are expected to complete the MMSc year in one year with additional work required in the fourth MD year. Students may petition the Program Director in writing for an extension of time. (See Section 2.06 for definitions of full- and part-time.)

H. Requirements for graduation

Students must meet all program requirements in order to graduate with the Master of Medical Sciences degree. They must complete the required courses and receive either 56 (for the dual MD-MMSc program) or 64 course credits. Additionally, each student’s thesis committee must approve the completed written thesis and thesis presentation. A degree will not be granted to a student who is not in good standing or against whom a disciplinary charge is pending. In addition, a student’s term bill must be paid in full before he/she will be awarded a diploma.

VI. Advising

Once a student matriculates into the MMSc Med Ed program, he/she meets with the Program Director to identify potential advisors based on the student’s research interests. The Program Director provides advisor suggestions and facilitates introductory meetings for the student and potential advisors. The final advisor choice is the student’s decision and the program expects that
each student will formally ask the identified primary advisor if/she has the capacity to serve before assuming this relationship. Students may consult program’s ‘Guide for Thesis Mentors’ for further details and the specific expectations of a thesis mentor during this process. In addition to finalizing mentorship during the first year of the program, students form a thesis committee. Please see Section ‘E. Mentored Research’ above for further information on the expectations of a thesis committee. The thesis committee will meet twice during the second year of the program (November/December and April/May).

VII. Financial Aid

Program applicants are encouraged to apply for external grants and individual fellowships whenever possible.

Students who are enrolled at least half-time may be eligible for other federal or private aid. See Section 6.07 for financial aid information.

1.03 Plans of Instruction for Master of Discipline Programs

A Master of Discipline degree from HMS represents recognition of successfully completing advanced study within a specific topic area. The requirements for receipt of a Master of Discipline degree are rigorous and standardized across programs. While each Master of Discipline degree program may have a unique focus, it is expected that all graduates of such programs will: (a) achieve mastery in a core curriculum that enriches the biomedical research, teaching, and/or clinical career of the student and (b) complete other courses that, together with the core curriculum, provide appropriate didactic training to match the program’s focus. In keeping with this concept, each program has a Mission Statement that outlines the goals and objectives of the program.

Each Master of Discipline program requires the completion of 36 credits of instruction and scholarly work, including a 4-credit capstone project. The remaining credits consist of required core courses, electives, and seminars. Descriptions of the one year programs and their curricula follow.

Master of Bioethics

I. Background and Overview of Program

Bioethics, most broadly, may be understood as a field of ethical inquiry in the life sciences. Over the past 50 years, the field of bioethics has undergone rapid growth as science and technology have expanded the limits of the possible. Advances in life-prolonging and sustaining technologies in the 1960s, in particular, were central in the emergence of medical ethics, a subset of bioethics, as physicians (and more generally the institution of medicine) were forced to address the scientific, social, moral, and even political implications of advances in science that began to translate into the ability to change the fundamental landscape of life and death. Framed in the context of the doctor-patient relationship, decisions about these early applications of science to bedside medicine gave rise to what became the rapidly growing field of medical ethics.
As science and technology continued to advance, the intersection of moral inquiry and life sciences also expanded, leading to the emergence of critical questions beyond the context of the doctor-patient relationship to a broader ethical landscape reflecting the central moral challenges and tensions created by scientific discovery and the possibility of greater intervention in the creation of, conditions of, and limits of life on a societal scale. These challenges, while deeply rooted in and informed by medicine, are no longer squarely limited to medical ethics, but are part of medical, scientific, philosophical, social, and even political inquiry; and ethical issues related to emerging technologies often hinge on some of the deepest questions about the meaning of human life and our concepts of dignity and respect. As such, bioethics has emerged as both an academic and practical enterprise. Expertise in bioethics requires both a rigorous foundation in philosophical inquiry and theory and careful study about how to engage actual challenges affecting both individuals and society.

In choosing the term “bioethics” rather than “medical ethics” for a new 36-credit master’s degree program at HMS, we consciously acknowledge that many of the most challenging issues in medicine today occur away from the bedside. For example, population-based ethics explicitly requires an analysis of what is best for populations rather than for individual patients and an articulation of the tensions between these views. Similarly, challenges in contemporary research ethics require a balancing of the risks to individuals against the potential benefit to future patients and populations.

The Center for Bioethics (the Center) has developed a Master of Bioethics program, the mission of which is to provide a comprehensive, one-year curriculum in bioethics to individuals with careers in other primary disciplines in order to enable them to translate their expertise into specialized focus on contemporary challenges in bioethics. The Master’s degree program will fulfill this purpose by providing every student with a rigorous foundation in all aspects of bioethics – theoretical and applied – and the tools to engage in an important issue in the field relevant to the individual student’s career goals through a year-long capstone project. The HMS Master of Bioethics is, therefore, structured as an adjunct and not as a terminal degree, i.e. the Master’s degree alone would not be sufficient for entry into a career in bioethics without additional professional education and/or experience. Instead, through completion of the degree program, professionals and academics in other core disciplines will gain the theoretical foundation, practical knowledge, and skills in a rigorous degree program that is theoretically robust but also critically relevant to contemporary challenges.

Advanced study in bioethics in the HMS Master’s program would be relevant to individuals in a wide range of academic concentrations and professions given the diversity of challenges in contemporary bioethics. It is, therefore, anticipated that physicians across medical disciplines would enroll in the course of study, and also individuals with careers as varied as nursing, law, philosophy, theology, anthropology, sociology, public health, biomedical research, and biotechnology innovation. Although there will be a one-year, full-time option, since most degree candidates will already have established careers, the program structure will also allow for substantial completion of studies in the late afternoon hours in order to facilitate a part-time course of study over two years (four terms) while maintaining employment in the candidate’s primary field. This structure will also provide for a robust and vibrant interdisciplinary community of
candidates engaged in synergistic learning about and tackling of ever-evolving challenges in bioethics.

II. Degree(s) Offered

The Master of Bioethics is offered. This is a 36-credit program that may be completed on a full-time or part-time basis. The full-time program is completed in one academic year and the part-time program is completed in two academic years. See Section 2.06 for definitions of full- and part-time.

III. Prerequisites for Admission

In order to apply for the Master of Bioethics, applicants should have a terminal professional or academic degree, such as M.D., Ph.D., B.A./R.N., J.D., M.S.W., or M.B.A./M.P.A. Individuals currently enrolled in these degree programs might also consider adding a year of study to include a Master of Bioethics in anticipation of a professional or academic career in bioethics. Occasionally, applicants who hold only a bachelor’s degree (and are not nursing professionals) may have unusually strong qualifications that would make them strong candidates for the program, but these situations will be the exception rather than the rule, with the most common exception likely being post-baccalaureate students who plan to attend medical school or another graduate program and wish to complete the Master of Bioethics in a “gap year” while applying to graduate or professional school.

Applicants must submit the following application materials:

- Online application
- Letter of Interest
- Curriculum Vitae
- Undergraduate and graduate transcripts
- Three letters of reference

In addition, applicants for whom English is not the native language, and who did not receive their bachelor’s or graduate degree from an institution where English is the language of instruction, must take the TOEFL or IELTS. The Master of Bioethics program requires a minimum score of 100 on the TOEFL and/or a 7 on the IELTS.

Applications are open in October of each year, with a deadline date in mid-winter. The Admissions Review Committee will convene to make final decisions on admissions by March 31. Accepted applicants are invited to visit in the Spring prior to anticipated enrollment. Individuals are enrolled through the Registrar’s Office for September matriculation.

IV. Academic Residence Requirements

The Master of Bioethics requires that all didactic coursework take place on Harvard's campus (HMS or other Harvard Schools). The capstone project may be conducted on campus, at an HMS-
affiliated hospital, or at another institution/organization with HMS faculty supervision in concert with a local mentor or supervisor. All capstone projects/placements require formal approval of the Program Director or designee.

V. Course of Study

A. There are no concentrations offered.

B. Curriculum
Successful completion of the HMS Master of Bioethics program is based on two core tenets: first, each candidate must complete foundational coursework representing broad exposure to and understanding of the foundation, theory, practice, and central challenges in bioethics; and, second, each candidate must complete a capstone experience that demonstrates facility in and mastery of requisite knowledge, skill, and experience to engage meaningfully in bioethics inquiry and application in the specific field of their professional expertise.

The course of study for the Master of Bioethics, as described above, requires 36 credits, of which 32 are earned in classroom study and four are earned through a capstone project broadly taking the form of a mentored academic project or externship/experience with a written paper.

The backbone of the Master’s curriculum is the required year-long, eight-credit foundational course, Foundations of Bioethics. This course is a multilayered approach to the core challenges in bioethics, from the philosophical underpinnings to the application of theory to central challenges in bioethics and, beyond, to how policy and law shape and are shaped by moral challenges in the life sciences. The course combines readings from original philosophical texts, theoretical critiques, critical evaluation of key areas of bioethics inquiry, legal and policy approaches to subject matter areas (where applicable), and examination of other critical forces, such as religion and social science, that have shaped our understanding of and scholarship and practice in bioethics. For example, the broad topic of end-of-life issues would be addressed through various lenses to build a robust and comprehensive appreciation and understanding of the relevant theory (including philosophy, religion, and science), practice, approaches, and societal framework – as expressed through current events, law, and policy, which exist at the macro-level.

In addition to Foundations of Bioethics, degree candidates are expected to complete a minimum of three selective courses (or minimum of 12 credits) covering critical areas in the field of bioethics. It is the expectation of the program that, in order to complete a Master’s course of study, students will demonstrate knowledge and analytic ability in a substantial body of the central bioethics topics. Restated, the foundational course is a necessary but not sufficient syllabus to cover the breadth of the field, and additional coursework related to key concepts, subject areas, and challenges will be achieved through the selective courses.

Students may elect to complete additional selective courses (beyond twelve required credits) towards the credit requirement; however, the course of study for any individual student might benefit from cross-disciplinary study in other parts of the University. Given the breadth of backgrounds of enrolled students, each student will have an individually-tailored study plan and
will progress according to it. Each study plan is approved by the Director to ensure both adequate core study and specialized study where needed to support the student’s capstone experience and career goals. In exceptional circumstances, a student with a specific educational background and particular educational goals may petition the Director, in advance, for exemption from the requirement for three selective courses, although a total of 36 credits must still be earned. Any deviations from the set curriculum will require approval from the Director and the Master of Bioethics program Advisory Committee.

Students may also elect to take a limited number of courses through cross-registration across the University, subject to availability. This option ensures opportunities for an even broader range of courses for individual students seeking study in particular areas.

The final four credits of the curriculum will be through a year-long capstone project.

## Full time course of study

<table>
<thead>
<tr>
<th>Fall</th>
<th>January</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundations of Bioethics I*</td>
<td><strong>choose from:</strong> Electives at HMS,</td>
<td>Foundations of Bioethics II*</td>
</tr>
<tr>
<td>4 credits</td>
<td></td>
<td>4 credits</td>
</tr>
<tr>
<td>One or Two Required Selectives</td>
<td>Additional selective</td>
<td>One or Two Required Selectives</td>
</tr>
<tr>
<td>4 credits each</td>
<td></td>
<td>4 credits each</td>
</tr>
<tr>
<td>Electives</td>
<td>Cross-register course</td>
<td>Electives</td>
</tr>
<tr>
<td>2-6 credits</td>
<td></td>
<td>2-6 credits</td>
</tr>
<tr>
<td>Capstone*</td>
<td></td>
<td>Capstone*</td>
</tr>
<tr>
<td>2 credits</td>
<td></td>
<td>2 credits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>16 credits</th>
<th>4 credits</th>
<th>16 credits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL REQUIRED</strong></td>
<td></td>
<td>36 credits</td>
</tr>
</tbody>
</table>

**Full time option** will follow the above format starting in late August and completing degree the following May.
# Part-time course of Study

## YEAR ONE

<table>
<thead>
<tr>
<th>Fall</th>
<th>January</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Foundations of Bioethics I</strong>*</td>
<td><strong>choose from:</strong></td>
<td><strong>Foundations of Bioethics II</strong>*</td>
</tr>
<tr>
<td>4 credits</td>
<td>2-4 credits of J-Term courses</td>
<td>4 credits</td>
</tr>
<tr>
<td><strong>One Required Selective</strong></td>
<td>No courses</td>
<td><strong>One Required Selective</strong></td>
</tr>
<tr>
<td>4 credits OR</td>
<td></td>
<td>4 credits OR</td>
</tr>
<tr>
<td><strong>MBE Electives</strong></td>
<td></td>
<td><strong>MBE Electives</strong></td>
</tr>
<tr>
<td>or cross-register</td>
<td></td>
<td>or cross-register</td>
</tr>
<tr>
<td>2-4 credits</td>
<td></td>
<td>2-4 credits</td>
</tr>
</tbody>
</table>

8-12 credits 0-4 credits 8-12 credits

**Total Year One** 18-20 credits

## YEAR TWO

<table>
<thead>
<tr>
<th>Fall</th>
<th>January</th>
<th>Spring</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Capstone</strong>*</td>
<td><strong>choose from:</strong></td>
<td><strong>Capstone</strong>*</td>
</tr>
<tr>
<td>2 credits</td>
<td>2-4 credits of J-Term courses</td>
<td>2 credits</td>
</tr>
<tr>
<td><strong>One Required Selective</strong></td>
<td>or No courses</td>
<td><strong>One Required Selective</strong></td>
</tr>
<tr>
<td>4 credits OR</td>
<td></td>
<td>4 credits each OR</td>
</tr>
<tr>
<td><strong>Electives</strong></td>
<td></td>
<td><strong>Electives</strong></td>
</tr>
<tr>
<td>2-6 credits</td>
<td></td>
<td>2-6 credits</td>
</tr>
</tbody>
</table>

6-12 credits 0-4 credits 6-12 credits

**Total Year Two** 16-18 credits

**Total Required** 36 credits

**Part time option** will take one half of the requirements per year.
- Foundations of Bioethics I and II must be taken in the first year.
- Capstone will be completed in the second year.
C. Course Descriptions

REQUIRED COURSES:

**Foundations of Bioethics I and II (8 credits)**
Rebecca Brendel, MD, JD and Patrick Smith, PhD

Foundations of Bioethics I and II are the first and second semesters of the year-long, eight-credit, required course sequence for the Master of Bioethics Degree. The Master of Bioethics program requires Foundations I in the first semester of study. The course is a multilayered approach to bioethics, from the philosophical underpinnings to the application of theory to central challenges in bioethics and, beyond, to law and policy. Foundations I will combine readings from original texts, theoretical critiques, legal and policy approaches to subject matter areas, and examination of other critical forces such as social science and religion, that have shaped contemporary bioethics. The course will combine lecture and discussion formats with a strong emphasis on student participation. Course evaluation will be based on a final take-home examination each semester, 5 brief writing assignments over the course of each semester, and class participation.

**Capstone Seminar I and II (2 credits per term x 2 terms)**
Christine Mitchell, RN, MS, MTS, Bizu Gelaye, PhD, MPH, and David Sontag, JD

The capstone experience and seminar is a required component of the Master’s program that provides a mentored field placement or project so that each student participates actively in applied bioethics work. The Capstone Seminar is intended to help each student reflect upon their own and others’ field experiences, thereby developing an appreciation for the range and complexities of real-world work in clinical ethics, research ethics, or law and/or public policy related to bioethics. Together, the Capstone and associated Seminar focus on acquiring knowledge through experience and linking theoretical knowledge with the techné (craft, skill or art) of bioethics practice. A central feature of the seminar involves consideration of the role responsibilities, professional skills, and virtues of those doing practical bioethics work. **Special Note:** Students will be matched with capstone mentors for this requirement.

SELECTIVES:

**Introduction to Clinical Ethics (4 credits)**
Anthony Breu, MD

Introduction to Clinical Ethics is a core course in the Master of Bioethics program at Harvard Medical School. There are 14 three-hour sessions covering major principles and themes in Clinical Ethics (e.g. futility, physician-assisted suicide, advance directives). Each session includes approximately two hours of interactive case-based lecture and discussion, followed by a one-hour practicum. The practicum is modeled around the experience of a clinical ethics committee with small groups of students working through a case and crafting an interpretation and set of recommendations.

**Research Ethics (4 credits)**
Rebecca Li, PhD, and Spencer Hey, PhD

This 14-week Research Ethics course is designed to provide the student with a comprehensive foundation in research ethics. After taking this course, students will be prepared to manage many of the complex, real-life ethical issues that have attracted public attention in recent years, such as undue influence and coercion of research participants, concerns about privacy and confidentiality of clinical trial data, concerns about unjust research trials in low resource countries, and uncertainty about the value of genetic testing in drug development and study design. The class will meet weekly for 3 hours. Each class session will be built
around a critical discussion of a case study that elucidates the complex interplay of philosophical, scientific, and practical considerations that characterize the field of research ethics.

**Methods in Bioethics** (2-credits)
Eric Campbell, PhD
This 2-credit course will provide students with an introduction to applied ethics and policy. Applied ethics is defined as the application of research methodologies (both qualitative and quantitative) to ethical issues in the medicine and biomedical research. The results of the applied ethics research are then used to influence the adoption and modification of policies and practices at the national, state or institutional level.

**Health Law, Policy, and Bioethics** (4 credits)
Aaron Kesselheim, MD, JD and Holly Fernandez Lynch, JD, MBioeth
This course is an introduction to legal topics in health policy and bioethics. It requires no experience in law, beginning with a brief primer on American law and how it works. Topics covered will include legal aspects of the doctor-patient relationship, medical malpractice, privacy issues, health care finance, end-of-life issues, organ donation, disability, mental health, public health, medical product regulation, food regulation, and intellectual property. The course will not cover issues in reproductive ethics or human subjects research regulation, as those are part of other Master’s courses. Students will be evaluated via class participation and written work. The reading load will be moderate to heavy. Sessions will be a mix of lecture and seminar-style, with occasional guest speakers.

**Global Health Ethics** (2 credits)
Sadath Sayeed, MD, JD
This course will examine foundational normative problems and pragmatic ethical challenges facing those who work in some capacity to improve health outcomes for very poor populations living under conditions of severe resource scarcity. We will interrogate basic conceptual ideas such as “what do we mean by ‘global health equity’?” and the nature and root sources of “resource scarcity”, in addition to focusing on specific practical concerns such as 1) how to conduct ethical responsible research on and with socially and economically disadvantaged and vulnerable populations, 2) macro-economic and micro-bedside resource allocation dilemmas, and 3) health care worker “brain drain” from poor to rich locales.

**Neuroethics** (2 credits)
Paul Ford, PhD
We will undertake a survey of the ethical issues related to current and future neurotechnologies. These include such topics as Consciousness, Selfhood, and Free Will; Animal Consciousness, Computer Consciousness, and Brain-Computer Interfaces; the use of neuroscience in the courts and cognitive enhancement. We will cover many topics related to medical care for patients with neurological disorders, including disorders of consciousness, deciding for others, preclinical imaging and genetic testing for patients with neurological disorders, as well as neuro-theology.

**Ethics in Reproductive Medicine and Women’s Health** (4 credits)
Louise King, MD, JD
The course will examine ethical issues that arise in reproductive medicine and women’s health. Specifically, we will address ethical questions that arise in the context of providing assisted reproduction services, family planning services, pregnancy care and surgical services to women and their families. Questions and issues that will be addressed in the course include the following: ethics surrounding the abortion and fetal tissue research debate; multiple cases in assisted reproduction including sex selection, savior siblings, age restrictions in IVF, intra-familial gamete donation, post-humous reproduction; cases at
the maternal fetal divide and discussion of the balance of interests in these cases; genetic engineering in assisted reproduction.

**Ethics in Genomics (2 credits)**
Effy Vayena, PhD
The aim of this course is to offer an in-depth exploration of key ethical challenges and controversies surrounding recent developments in genomics. The course is designed in seven three-hour sessions with each session covering a specific topic. Topics include the appropriate informed consent for genomic testing, direct-to-consumer offers of personal genomic testing, the return of incidental findings etc. For each of the identified challenges we will examine a) how they emerged and why, b) what is the current state of the debate, including the current policies for best practice and c) what are the new directions, if any, in resolving some of the most acute controversies around the challenges. Each session will begin with a lecture, followed by discussion and student-driven projects. Student-driven projects include a variety of formats such as discussion of selected case studies, presentation of a journal article, debate panels. Students will have the option to select their assignment in the first day of class.

**Reasoning and Writing in Bioethics (2 credits)**
Martha Montello, PhD, and Spencer Hey, PhD
Course description in progress

**ELECTIVES:**

**Health and Human Rights (2 credits)**
J. Wesley Boyd, MD, PhD
This course will be taught in seminar format; the instructor will facilitate discussion based on each week’s readings. The course will examine health and health care in the context of human rights. Questions and issues that will be addressed in the course include the following: If we have a right to health, does that include the right to health care or the right to receive medications? If so, what are some of the systematic obstacles to actually obtaining needed care? In addressing these issues we will examine some of the social determinants of health, including education, poverty, the social safety net, and the profit driven elements of much of our health care system. We will also explore health at the interface of global conflict, including such issues as torture and the oppression of minority groups. We will also explore vulnerable populations including refugees and those with mental illness.

**Critical Reading of Contemporary Books in Bioethics (2 credits)**
J. Wesley Boyd, MD, PhD and Robert Truog, MD
This course is intended to expose students to a variety of contemporary books that address various bioethical issues. The course will do so in the following manner. For each of the 4 books that will be read in the course, we will first conduct a two-hour seminar in which the students and faculty discuss and analyze the book and prepare for the author’s visit. Subsequently, the class will attend a 1.5 hour public lecture and forum with the author, followed by a 2 hour session with the author. Following each book/author, students will complete a writing assignment that will vary in format throughout the semester. Assignments will include mock book reviews and others will be more analytic evaluations of the central argument(s) in the book, with at least one essay intended for a non-academic audience.

**Narrative Ethics (2 credits)**
Martha Montello, PhD
This elective course focuses on narrative approaches to ethical issues in clinical medicine. Using literary narratives and poetry as the primary readings, the course methodology emphasizes the importance of
particularity, contingency, change, voice, context, and time in recognizing, evaluating, and resolving moral problems. The course aims to develop skills in critical and reflective reading and writing that enhance competence in clinical ethics. Texts include fiction, essays, and poetry. Approximately two hours of reading is assigned for each class hour. The instructor provides necessary philosophic and literary context at the beginning of each class session, the balance devoted to discussion. Students are expected to write five reflection essays that examine such areas as the meanings of illness, the moral role of the physician, and the relevance of emotions, culture, faith, values, social realities, and life histories to ethical patient care.

Bioethics Advocacy (2 credits)
J. Wesley Boyd, MD, PhD
This course seeks to highlight various bioethical issues and dilemmas—especially those that might have relevance in the national discourse about health care—and then develop strategies and ideas for how to research the issues at hand and also promote awareness about them among those in healthcare and, perhaps, the general public as well. Specific topics that will be covered during this month-long intensive course will be developed during the course according to student interests and might include the following: US healthcare reform; health disparities and social justice; the impact of social, economic, political, and environmental factors on health; human rights (including healthcare personnel involvement in interrogation and torture); advocacy on behalf of vulnerable populations, and cultural awareness and competency.

Theological, and Religious Perspectives in Bioethics (2 credits)
Patrick Smith, PhD
This seminar course is designed to reflect on the role and contributions of theological positions and various religious traditions to the interdisciplinary field of bioethics. Attention is given to the unique influence of theological voices on the development of bioethics in the North American context. Moreover, it identifies some of the principles embraced by these approaches and how they guide decisions in health care. Thus, it surveys a few examples of how theology engages the perennial and emerging questions in bioethics. Throughout the course emphasis is placed on how these insights can assist bioethicists in resolving some of the concerns that emerge particularly in clinical bioethics. Reflection also is given to the interplay of religious bioethics and public discourse. The course combines lecture, discussion, and student presentations.

Frontiers in Bioethics (2 credits)
Jared Silberman, JD
Frontiers in Bioethics is a course in which students will learn about emerging technologies and the unique moral considerations raised by these advances. In this course, students will gain familiarity with emerging technologies including robotics, artificial intelligence including self-correcting machines, synthetic biology, and cyborgs (humans merging with machines) and both how bioethics informs these advances and the bioethics implications of technology. Finally, the course will explore how bioethics considerations may influence policy towards technological advances. Class will be taught in seminar format with an emphasis on group participation. Evaluation will be based on class preparation and presentations and two writing assignments.

Advanced Manuscript Preparation – Year long (2 credits)
Martha Montello, PhD
Advanced Manuscript Preparation is a course open only to students in the Master of Bioethics Program selected by the course instructor and limited in enrollment. The purpose of this course is to provide a year-long writing development and peer-review opportunity for advanced students who have already mastered high-level oral and written communication skills and who have a clearly defined and developed writing project proposal prior to the start of the course. Students will be expected to complete a substantial, publishable manuscript by the end of the course. Towards this end, students will develop, evaluate, and use
professional voice, style, investigative rigor, and audience/publication selection skills appropriate to their projects.

**CONSORTIUM TUTORIALS:**

**Clinical Ethics Consortium Tutorial** – Year-long (2 credits)
Judith A. Johnson, JD

**Class Days / Times:** Monthly on Fridays (typically 1st Friday of the month). Consortium 12:30-2 followed by tutorial from 2-4 pm

The Clinical Ethics Consortium Tutorial is designed to enable students to discuss a wide variety of real clinical cases and methods of ethics consultation in health care in order to develop expertise in analyzing ethics cases and consults. In addition to participation in monthly multi-disciplinary clinical ethics case conferences with a variety of clinicians, ethicists and faculty, students will subsequently gather as a small group to analyze each month’s case in greater depth, and examine various approaches to ethics analysis and strategies for ethics consultation. Skills in ethical analysis, perspective-taking, logical argument and justification will be emphasized.

**Research Ethics Consortium Tutorial** – Year-long (2 credits)
Melissa Abraham, PhD

**Class Days / Times:** Monthly on Fridays (typically 3rd Friday of the month). Consortium 12:30-2 followed by tutorial from 2-4 pm

The Research Ethics Consortium Tutorial is designed to enable students who are interested in the ethical review process in research to discuss a variety of real research protocols in biomedical and social-behavioral research in order to develop expertise in reviewing of research protocols, methods, regulatory requirements, and ethical challenges. In addition to participation in monthly multi-disciplinary research ethics consortia conferences with a variety of researchers, ethicists, institutional review board (IRB) members and faculty, students will subsequently gather as a small group to analyze each month’s protocol in greater depth from the perspective of the IRB, and examine various approaches to regulatory ethics analysis. Students will discuss approaches to addressing ethical challenges within the regulatory framework of research. In addition, students will have the opportunity to observe IRB meetings at local hospitals and to participate mock IRB panels. Assignments include reflection essays based on related readings and creating an IRB protocol and consent form.

**Policy Ethics Consortium Tutorial** – Year-long (2 credits)
Aaron Kesselheim, MD, JD, MPH

**Class Days / Times:** Monthly on Fridays from 12:30 – 4 pm (typically 2nd Friday of the month).

This course will cover topical issues at the intersection of ethics, policy, law, and health care delivery. It is designed to give students a facility in examining these issues from different perspectives and considering policy solutions that address the needs of the various stakeholders. In addition to participation in monthly policy and ethics seminar with 2 national experts on the topic, students will subsequently gather as a small group to analyze the ethical foundations of the issue and practical ways forward. We will seek to promote skills in ethical analysis, practice converting ideas into practical policymaking solutions, and develop the ability to synthesize varying perspectives.

**NOTE:** students may only enroll in one consortium tutorial: clinical, research, or policy unless prior approval has been granted by Program Director for compelling circumstances

PLEASE NOTE: All courses are subject to final approval.
D. Expectations for Students

32 credits of didactic coursework as described above must be completed over the course of two (for the full-time program) or four (for the part-time program) terms (term 1 is late August to December and term 2 is January – May). The capstone project will be completed over the course of one academic year. For full-time students, some credits must be earned through short courses offered in January. Part-time students may elect, but are not required, to enroll in January coursework.

Students are expected to attend all classes, arrive on time, and be fully prepared to participate actively in the class. See Section 2.02 for the Attendance Policy.

E. Capstone Experience

The capstone experience is a mentored project or practical experience with a written paper. Each capstone experience will be overseen by a faculty mentor/adviser with review by the Director of the Capstone program and the Director of the Master’s Program at regular intervals to monitor successful progress. For part-time students, the capstone experience will be completed in the second year of the program. Students will also take the Capstone Seminar during the year they complete their capstone.

F. Assessment

The core and selective courses at HMS and the capstone project will be graded with letter grades. Satisfactory is defined as a B- or better. Courses taken at other Harvard schools will be graded in accordance with that school’s policies. Students will be considered to be achieving satisfactory academic progress through the attainment of a “SAT” or B average or above in all courses and by demonstrating ongoing progress with the capstone project.

G. Length of Time to Degree

Bioethics students are expected to complete the Master of Bioethics degree program in one year if enrolled full-time and two years enrolled part-time. Students may petition the Program Director in writing for an extension of time. (See Section 2.06 for definitions of full- and part-time.)

H. Requirements for Graduation

The curriculum and course of study for the Master of Bioethics is geared to the HMS requirements that degree recipients will both achieve mastery in a core curriculum that enriches the career of the student and complete courses that provide appropriate didactic training to match the program’s focus.

Students must maintain satisfactory academic progress in all coursework and complete the capstone project with a passing grade in order to graduate. A degree will not be granted to a
student who is not in good standing or against whom a disciplinary charge is pending. In addition, a student’s term bill must be paid in full before he/she will be awarded a diploma.

VI. Advising

Each student will be assigned a faculty advisor who will meet with the student at least once per term.

VII. Financial Aid

At this time, the program does not have any resources for scholarship support. In future years, the program may have very limited resources for scholarships. Program applicants are encouraged to apply for external grants and individual fellowships whenever possible. Accepted students will be provided with information from the HMS Financial Aid office on the process for applying for Federal Loans and Federal Work Study. U.S. citizens and U.S. permanent residents are eligible to apply for these types of aid through the HMS Financial Aid office.

Students who are enrolled at least half-time may be eligible for other federal or private aid. See Section 6.07 for financial aid information.

Master of Biomedical Informatics

I. Background and Overview of Program

The Department of Biomedical Informatics at Harvard Medical School offers a 36-credit Master of Biomedical Informatics program. This program is meant for students who want to learn more about the exciting and growing field of biomedical informatics. Students have the opportunity to learn from experts from throughout the Harvard Medical School community. Graduates of the program will have an excellent understanding of the fundamentals of the field and will be proficient in applying a broad range of informatics approaches, methods, and techniques in their chosen careers.

The practice of clinical care and biomedical investigation each constitute complex enterprises that are increasingly dependent on the mastery of enormous data streams. There is increasing urgency to leverage the enormous advances in genomic science, the near ubiquity of health information technology, and new methods for managing and analyzing large data sets in order to accelerate biomedical discovery and improve the delivery of health care. Our goal is to equip our students with the knowledge, skills, and experiences needed to engage meaningfully in the field of biomedical informatics.

The program provides the intellectual framework for clinicians and biomedical scientists in the systematic and sound use of quantitative methods to increase agility with such methods in their respective domains. The program includes an intensive, hands-on quantitative boot camp, a range of foundational courses, and courses in emerging areas such as precision medicine, data science,
and data visualization. All students are expected to complete a research project and to participate in a longitudinal seminar series.

The program targets postdoctoral students who recognize the relevance of informatics to their research, medical doctors who are interested in qualifying for the subspecialty in clinical informatics, and medical students who would like to explore the importance of informatics in the practice of medicine.

II. Degree(s) Offered

Master of Biomedical Informatics, 36-credit program that may be completed over one or two years.

III. Prerequisites for Admission

In order to apply for the Master of Biomedical Informatics program, applicants must have received a Ph.D. or M.D. or a comparable doctoral degree from an accredited domestic or foreign institution. Eligible doctoral degrees include, but are not limited, to the following: D.D.S., D.M.D., D.O., D.V.M., O.D., D.P.M., Sc.D., Eng.D., Dr.P.H., D.N.Sc., D. Pharm., D.S.W., and Psy.D. Medical students taking a research year are also eligible for this program.

Applicants also must have a working knowledge and demonstrated understanding of:

Biostatistics, including, for example:

- Hypothesis testing
- Linear regression
- Classification basics: what it is, and how to test and diagnose a classifier (e.g. sensitivity/specificity)

Programming and computer science:

- Experience with at least one programming language (including knowledge and understanding of algorithms, variables, control structures, etc.)
- Knowledge of the basics of the R programming language
- Data handling (e.g. managing files, parsing data, basic database principles)

Applicants must submit the following application materials:

- Online application
- Letter of Interest
- Curriculum Vitae
- Undergraduate and graduate transcripts
- Three letters of reference
In addition, applicants for whom English is not the native language, and who did not receive their bachelor’s and doctoral degrees from an institution where English is the language of instruction, must take the TOEFL or IELTS. The MMSc in Biomedical Informatics program requires a minimum score of 100 on the TOEFL and an 8 on the IELTS.

IV. Academic Residence Requirements

The Master in Biomedical Informatics requires that all didactic coursework and research take place on Harvard’s campus (HMS or other Harvard Schools) or at an HMS-affiliated hospital.

V. Course of Study

A. Concentrations offered

The Master of Biomedical Informatics offers two concentrations:
- Bioinformatics
- Clinical Informatics

B. Curriculum by term

The program follows the Master's calendar (Section 2.01). This table shows the syllabus for the one year program:

<table>
<thead>
<tr>
<th>Course Name</th>
<th>HMS Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prerequisite</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>First term</td>
<td></td>
</tr>
<tr>
<td>Bootcamp in Quantitative Methods</td>
<td>-</td>
</tr>
<tr>
<td>Foundations of Biomedical Informatics I</td>
<td>4</td>
</tr>
<tr>
<td>Computational Statistics for Biomedical Sciences</td>
<td>4</td>
</tr>
<tr>
<td>Precision Medicine I: Genomic Medicine (Half course)</td>
<td>2</td>
</tr>
<tr>
<td>Precision Medicine II: Integrating Clinical and Genomic Data (half course)</td>
<td>2</td>
</tr>
<tr>
<td>Clinical Informatics I: Foundations of Clinical Informatics OR Bioinformatics I: Quantitative Genomics</td>
<td>4</td>
</tr>
<tr>
<td>Readings in Biomedical Informatics I</td>
<td>2</td>
</tr>
<tr>
<td>Subtotal HMS Credits</td>
<td>18</td>
</tr>
</tbody>
</table>
### Second Term

<table>
<thead>
<tr>
<th>Course Description</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Informatics II: Health Information Technology Innovation OR</td>
<td>4</td>
</tr>
<tr>
<td>Bioinformatics II: Introduction to Computational Biology and Bioinformatics</td>
<td></td>
</tr>
<tr>
<td>Big Data Innovations in Population Health OR</td>
<td>4</td>
</tr>
<tr>
<td>Computational and Functional Genomics</td>
<td></td>
</tr>
<tr>
<td>Data Science I: Analytic methods for connecting the exposome, the genome and the phenome (half course)</td>
<td>2</td>
</tr>
<tr>
<td>Data Science II: Data Visualization for Biomedical Applications (half course)</td>
<td>2</td>
</tr>
<tr>
<td>Foundations of Biomedical Informatics II</td>
<td>4</td>
</tr>
<tr>
<td>Readings in Biomedical Informatics II</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Subtotal HMS Credits</th>
<th>18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total HMS Credits</td>
<td>36</td>
</tr>
</tbody>
</table>

### C. Course descriptions

**Program Requirements**

- **Bootcamp in Quantitative Methods**: TBD (HMS: 0 credits)
  Directors: Gehlenborg, Nils and Kharchenko, Peter

- **Foundations of Biomedical Informatics I**: BMI701 (HMS: 4 credits per semester)
  Director: Wright, Adam
  Grade Criteria: This is a graded course

- **Foundations of Biomedical Informatics II**: TBD (HMS: 4 credits per semester)
  Director: Wright, Adam
  Grade Criteria: This is a graded course

- **Readings in Informatics I & II**: TBD (HMS: 2 credit per semester)
  Director: Patel, Chirag
  Grade Criteria: This is a graded course

- **Computational Statistics for Biomedical Sciences**: BMI 713 (HMS: 4 credits)
  Director: Peter J Park
  Grade Criteria: This is a graded course

- **Precision Medicine I: Genomic Medicine**: TBD (HMS: 2 Credits)
  Director: Isaac Kohane
  Grade Criteria: This is a graded course
Precision Medicine II: Integrating Clinical and Genomic Data: TBD (HMS: 2 Credits)
Director: Paul Avillach
Grade Criteria: This is a graded course

Data Science I: Analytic methods for connecting the exposome, the genome and the phenome
TBD (HMS: 2 Credits)
Director: Patel, Chirag
Grade Criteria: This is a graded course

Data Science II: Data Visualization
Director: Nils Gehlenborg
Grade Criteria: This is a graded course

Concentration Requirements

Clinical Informatics I: Foundations of Clinical Informatics: BMI720 (HMS: 4 credits)
Directors: Safran, Charles
Grade Criteria: This is a graded course

Clinical Informatics II: Health Information Technology: From Ideation to Implementation: BMI
741 (HMS: 4 Credits)
Director: Adam Landman
Grade Criteria: This is a graded course

Big Data Innovations in Population Health: BMI 726 (HMS: 4 Credits)
Director: Kenneth Mandl
Grade Criteria: This is a graded course

Bioinformatics I: Quantitative Genomics: HST. 508 (HMS 4 credits)
Director: Mirny, Leonid
Grade Criteria: This is a graded course

Bioinformatics II: Introduction to Computational Biology and Bioinformatics: BIO 512 (HMS: 4
Credits)
Director: Shirley Liu
Grade Criteria: This is a graded course
Computational and Functional Genomics: BIOPHYS 205 (HMS: 4 credits)
Directors: Shamil Sunyaev and Suzanna Gaudet
Grade Criteria: This is a graded course
D. Expectations for students by term or year

Students will be formally evaluated in each course, through oral and written work. Attendance is required for all course meetings (See Attendance Policy in Section 2.02).

Students may enroll in courses at other Harvard Schools, with the permission of those Schools and the guidance and permission of the Program Director and Course Directors.

A written final research project is required.

E. Mentored research/capstone project

Each student will be responsible for developing a plan for a research project, including identifying a research mentor who is best suited to his or her research interests. The director of the program, together with the director of the foundations course, will work with all students individually to ensure that they meet the requirements of the program and that each has a rich educational experience while enrolled in the program.

F. Assessment

Students receive a final grade for each course they take. This may be a letter grade or a satisfactory/unsatisfactory rating. In addition, students are evaluated throughout each course through regular homework assignments, class participation, and final projects that are presented orally and in written form.

G. Length of Time to Degree

Biomedical Informatics students are expected to complete the Master of Biomedical Informatics degree program in one year if enrolled full-time and two years enrolled part-time. Students may petition the Program Director in writing for an extension of time. (See Section 2.06 for definitions of full-and part-time.)

H. Requirements for graduation

Completion of the 36-credit curriculum and a written research project. A degree will not be granted to a student who is not in good standing or against whom a disciplinary charge is pending. In addition, a student’s term bill must be paid in full before he/she will be awarded a diploma.

VI. Advising

Students meet with the Program Director at least once during each year as well as at the termination of the program. Students work closely with the director of the foundations course, as well as their chosen mentor on the selection of their concentration, and topic for their research project.
VII. Financial Aid

The Biomedical Informatics Program has limited scholarship resources available through a training grant from the National Library of Medicine, NIH. Recipients must be eligible to receive U.S. federal government support. Other discretionary resources may also be available.

Students who are enrolled at least half-time may be eligible for other federal or private aid. See Section 6.07 for additional financial aid information.

1.04 Five-Year MD-Master's Programs

Certain MMSc and Master of Discipline programs may offer to enroll HMS MD students for a fifth year of study completed between the third and fourth years of medical school. Students should consult the plan of instruction above and/or program’s website to determine if this option is available. In the dual degree MD-MMSc program, the student completes a 56-credit MMSc course of study, including the 32-credit mentored research requirement, together with her/his requirements for the MD degree. In the dual degree MD-Master of Discipline program, the student completes the 36-credit Master of Discipline course of study including the four-credit capstone requirement, together with his/her requirements for the MD degree.

HMS medical students interested in pursuing a dual degree should refer to the medical student handbook.

See Section 6.01 for information regarding tuition and fees for the Master's degree year.

2. Academic Information and Policies

2.01 Academic Calendars for the Master’s Programs

HMS Master’s programs’ calendars are generally consistent with the University calendar. The Master's programs have two terms, Fall (July - December) and Spring (January - June), with some programs beginning during the summer session of the Fall term and some requiring coursework during the January session of the Spring term. Students should understand which calendar is applicable to each course or program and course/Program Directors should provide specific calendars for their courses/programs.

Master’s Programs Admissions/Enrollment Cycle Deadlines

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 1</td>
<td>Students notify program of intent to enroll</td>
</tr>
<tr>
<td>April 5</td>
<td>Programs notify financial aid office of names of expected new students and amount/source of aid the program will provide via grants or philanthropy</td>
</tr>
<tr>
<td>May 1</td>
<td>New and returning students’ deadline for applying for financial aid</td>
</tr>
<tr>
<td>May 31</td>
<td>Date by which students will be notified of financial aid awards</td>
</tr>
</tbody>
</table>
June 1 Programs notify Registrar of enrolling students with enrollment date specified for each student

Academic Year Calendar for HMS Master’s Degree Programs

**Enrollment date 1** Date on which the summer session of the Fall term begins, usually early July, for those programs with a summer session, either required or elective.

**Enrollment date 2** Date on which the Fall term begins, usually just after Labor Day. Orientation programs may be held by certain programs beginning on the Monday prior to Labor Day.

**Academic Calendar 2015 - 2016**

**Academic Calendar 2016 - 2017**

**Notes:**
1. HMS Master’s students cross-registering in other schools must abide by the registration policies of that school and by the calendar of that school, should it differ from the calendar above.
2. The calendar is subject to change.

**2.02 Attendance**

As a professional school, HMS expects attendance and active participation in all components of the curriculum, including all lectures, seminars, and other academically-related program activities. The granting of a Master’s degree attests to the fact that the student has demonstrated a commitment to his/her professional responsibilities through participation in all aspects of the curriculum as defined by the faculty.

HMS recognizes that there may be unexpected events outside a student’s control that may justify absence from a class or other academically-related activity. These include medical emergencies, family emergencies, and sudden changes in life circumstances. In such circumstances, a student is required to report the absence to the course and Program Directors as soon as possible and to discuss any implications for progress with the Program Director. Unreported or unexcused absences may lead to disciplinary action.

**Religious obligations** are a valid reason for an absence from a class or other academically-related activity. Massachusetts state law provides that a student in an educational institution who is unable, because of his/her religious obligation, to attend a class, participate in an examination, or meet a study or work requirement shall be provided with the opportunity to make up this work (see Section 7.01, Harvard University Policy Regarding Religious Holidays). Students should use careful discretion in judging the importance of a particular holiday and in requesting travel days around such holidays. The student must inform his/her course and Program Director in advance when he/she must be absent for a religious obligation. Extended time off beyond the timeframe of the official religious holiday will not be eligible for an approved absence. See also Section 2.03, Grading and Examinations.
Attendance at professional conferences is not considered sufficient reason for absence from a class or other academically-related activities of the program. While leadership in extracurricular and extramural activities is encouraged, such opportunities must not occur at the expense of a student’s required coursework and attendance responsibilities. Individual students may, however, request advance permission from the course and Program Directors to attend a scientific conference or meeting.

Requesting permission for any absence must be made in writing (email is acceptable) to the course and Program Directors.

Under no circumstances will an approved or unapproved absence relieve a student of meeting all of the academic requirements of the course or program; if the absence conflicts with a session or sessions that cannot be otherwise made up or completed, then it may affect the student’s grades or overall academic record.

Periods between terms are available as vacation periods. Students are not allowed to begin vacations prior to the term end dates or extend vacations beyond the term start.

Master’s students may not enroll in more than one Master’s degree program without the permission of each Program Director. Enrollment in multiple programs requires full tuition for each program.

Master’s students may not enroll in courses with overlapping meeting times.

Registered students may audit courses with the permission of the instructors concerned. However, students auditing a class may not take course examinations or receive course grades, and audited courses do not appear on students’ transcripts or count toward required credits.

Consequences of Noncompliance with Attendance Policy

Students who fail to comply with the School’s attendance policy face a number of serious consequences. These include the following:

1. Grades may be lowered.
2. An unreported absence from a course may result in a failure.
3. The Program Director will review attendance noncompliance to determine whether such unprofessional behavior warrants official censure in the student’s academic record.
4. Summative comments in the evaluations of courses may include descriptions of unapproved and/or unreported absences or tardiness.

Absent extenuating circumstances, any student who does not attend classes or is not working on his/her mentored research/capstone project for a period of 10 weekdays (during any term) without approval and has not been placed on an official leave of absence (LOA) will be considered absent without leave, and will be considered withdrawn from Harvard Medical School.
2.03 Grading and Examination

General Principles

The director of each course determines the nature, frequency, content, and scoring of student examinations.

In the unusual event that a student is excused from an examination, the course ordinarily will provide a make-up examination that is equivalent to but not the same examination given on the scheduled day of the original exam.

In the extraordinary circumstance that a student has examinations in two courses simultaneously, the student will bear the responsibility of notifying both Course Directors in writing. If the courses are both required, the Course Directors will consult with each other and the student to set the times at which their respective examinations are to be taken. If one course is required and the other elective, the student will take the exam in the required course at the scheduled time and work with the elective Course Director to arrange an alternative time for the elective course exam.

Students are required to pass all courses and cannot graduate with a failing/unsatisfactory grade in any course. Students who fail a required course are required to take a re-examination and/or do remedial work as approved by the Course Director. If a student fails re-examination or the student performs unsatisfactorily in the remedial work, a failing grade will be reported to the Registrar and, in some instances, the student may be referred to the Academic Progress and Review Board for the Master’s Programs (APRB) (See Section 4.03). Based upon the plan of instruction for the student’s program, the student may be required to retake the same or an equivalent course as approved by the Program Director.

Only one opportunity will be allowed to remediate an unsatisfactory or failing grade by repetition of a course. If a student fails to attain a satisfactory (or better) grade upon repetition of the course, the final grade will be unsatisfactory, and the student will be referred to the Program Director for consideration of the student’s future status in the Master’s program.

All unsatisfactory grades must be remediated before a student may graduate. (See Section 2.17, Satisfactory Academic Progress.)

All disciplinary cases involving a student must be resolved, and the student’s status in the School must be restored to “good standing,” before the student may receive a degree. Only students who are in good standing will be permitted to participate in commencement or related activities or exercises.

Grading System

1. HMS Master’s programs may be graded based on a letter grade (A, B, C, E) or satisfactory/unsatisfactory performance (SAT/UNSAT). Each individual program is expected to have a single grading system for all of its offered courses although different programs may have different grading systems.
2. Courses taken at other Harvard Schools will be graded based on the system in place for that school/course and all other policies related to satisfactory or failing performance at those Schools must be followed.

3. HMS master’s students are expected to maintain a “B” average or “satisfactory” standing throughout the course of study. Program Directors will monitor the performance and provide academic counseling as required. No student may graduate with a failing grade in a required course or the mentored research/capstone project.

4. A grade of *incomplete* signifies failure to complete course requirements because of personal illness, death in the family, or a similar compelling, serious reason, and must be resolved within a specified time or a failing grade will be recorded. A grade of *incomplete* may be given by a Course Director only for those reasons and must be given before the end of a course. A grade of *incomplete* must be accompanied by a written explanation to the Registrar and to the student's Program Director.

5. When incomplete and/or unsatisfactory/failing grades have been remediated, the course/director should notify the Registrar, in writing, as soon as possible in order for the grade to be updated in the student's permanent academic record.

**Final Examination Policy**

HMS Master’s programs and HMS courses may or may not require final examinations at the discretion of the Course Directors. If a final exam is required, please note the following.

1. Students are required to take final exams on the dates identified in the course syllabus.

2. Students may be permitted to take a final exam on a date later than the one identified in the course syllabus for the following reasons only:
   a. Failure to pass the exam the first time taken (Section 2.03).
   b. Extraordinary circumstances outside a student’s control that prevent him/her from physically taking the final exam on the date identified in the course syllabus (see Section 2.00 above).

3. In the event of 2b above, the student is required to notify immediately his/her course and Program Directors, who will determine whether the student may be permitted to take the final exam on a date later than the one identified in the course syllabus.

4. In no case will a student be allowed to take a final exam before the date identified in the course syllabus.

5. Students who are unable to take a final exam for the reasons cited above will be given a grade of *incomplete* for the course until the exam has been taken and passed, at which time the grade will be changed on the transcript.

6. Students who fail to take a final exam for other, non-sanctioned reasons will receive a failing grade, which will be recorded on the transcript.

7. No examinations shall be administered to an individual student via e-mail or any other remote arrangement unless this was the mechanism by which the original exam was administered to the entire class. Absent this arrangement, to ensure a ‘level playing field’ for every member of the class, students must be physically present for all examinations and make-up examinations.

8. In the event of 2a above, the student must sit for the exam on the designated make-up exam date. In the event of 2b above, the student must sit for the exam immediately following the circumstance that prevented him/her from sitting for the exam, per arrangement with the Course Director.
Students taking courses in other schools must follow the examination policies of that school.

2.04 Adding or Dropping Courses

For HMS courses, please be in touch with Program Director for additional information.

For non-HMS courses, students must abide by the school’s add/drop policy.

2.05 Cross Registration

Harvard University has a university-wide cross registration system to facilitate the process for students across all schools. The application is available at https://isites.harvard.edu/CrossRegistration.

Cross Registration into Harvard Medical School

A limited number of elective courses at Harvard Medical School are open to cross registration for students enrolled at other Harvard Schools. Candidates for Master’s degrees have first priority in registering for courses meeting core requirements; therefore, cross registration requests are accommodated on a space-available basis. Students taking HMS courses are subject to all the HMS rules and policies. Cross-registered (i.e., non-HMS) students in HMS courses will be graded in accordance with the grading system in place for each course. (See Section 2.03 for information on grading of HMS Master’s courses.)

Students interested in cross registering should visit https://isites.harvard.edu for instructions, calendars, course offerings and petitions. The e-mail contact for HMS Cross Registration is crossreg@hms.harvard.edu.

Cross Registration Out of Harvard Medical School

HMS Master’s degree students wishing to cross register into another Harvard School must complete the online cross registration process available at https://isites.harvard.edu/CrossRegistration. Please review the site for course offerings, instructions, calendars and petition forms.

N.B.: Courses taken through cross registration do not automatically count toward the Master’s degree requirements. The student should confirm with the Program Director that the course meets the program’s requirements and should request academic credit from the HMS Registrar prior to enrolling in the course.

2.06 Full- or Part-time Status Requirements

All students must be officially registered with the Registrar’s Office each year. Students who do not register will be withdrawn from the School.

MMSc degree programs require the completion of 64 credits (or 56 for MD-MMSc) with a minimum of 32 credits earned through a mentored research experience. Single degree MMSc programs encourage students to complete their degrees within an appropriate timeframe, preferably two years, although some students may be enrolled for three or more years. MMSc Programs may offer a part-time option with the
expectation that the requirements for the degree are completed in five years. Program Directors will discuss options with individual students as necessary.

Master of Discipline degree programs require the completion of 36 credits with four credits earned through a capstone project. Master of Discipline programs may offer both full-time (one year) and part-time (two or more years) options. Program Directors will discuss options with individual students as necessary.

Full-time status is defined as follows:

1. Enrolled in a standalone MMSc degree program with the expectation that requirements for the degree will be completed in two years. The actual full-time equivalent is .80 FTE. In many cases, students are also engaged in other professional activities while completing their degrees.
2. Enrolled in a fifth year of study (usually between M3 and M4) as part of a dual MD-Master’s program. The full-time equivalent is 1.0 FTE.
3. Enrolled in a Master of Discipline degree program with the expectation that requirements for the degree will be completed in one year. The full-time equivalent is 1.0 FTE.

Part-time status is defined as any commitment less than those described above and must be approved by the Program Director.

2.07 Policy on Length of Time to Complete a Master’s Degree

Master of Medical Sciences Programs
The minimum time to degree for a 64-credit, MMSc-only program is expected to be 16 months and the minimum time to degree for a 56-credit, combined MD-MMSc program is expected to be 14 months. In either case, it is likely that scheduling requirements and workload will result in students not completing the degree in 14 or 16 consecutive months, and the curriculum plan should reflect that accordingly.

Each program has specified its expectation for the maximum time to degree in Section 1.02 above.

Master of Discipline Programs
The minimum time to degree for a 36-credit, Master of Discipline program is expected to be one academic year. A two-year, part-time option may also be offered.

Each program has specified its expectation for the maximum time to degree in Section 1.03 above.

Extension of Time
Students who need time off for extenuating medical/personal issues are advised to take a Leave of Absence from the School (Section 2.08). Students may be eligible to be enrolled at HMS for additional periods for purposes of remediation or completion of degree requirements. Requests for exceptions are subject to review by the Program Director and the Academic Progress and Review Board (APRB) for the Master’s programs. See also Section 1.02, Five-Year MD-MMSc Program.
**Review of Time to Degree**

The academic records of HMS Master’s students are reviewed at least twice per year by the Academic Progress and Review Committee for the Master’s Programs to ensure that the standards of satisfactory academic progress are being met (see Section 2.17, Satisfactory Academic Progress).

**Impact on Financial Aid**

A student is eligible for financial aid for a maximum of 150% of the standard time to complete the degree, excluding time spent on approved leave of absence.

**2.08 Leaves of Absence**

A leave of absence (LOA) is a period of non-enrollment during which a student is not considered to be working toward a Master’s degree. An LOA may be granted for up to one year with the possibility of a one-year extension, on a case-by-case basis after review by the Program Director. A maximum of two years for leave is permitted, after which a student is automatically considered withdrawn from the school. In this instance, the student may apply for readmission through the applicable program. If a student is readmitted, he or she may be required to repeat a designated number of courses.

Students contemplating a leave of absence should meet with their Program Director, the HMS Registrar, and, if applicable, their financial aid officer for guidance.

*Any student who does not attend class or is not working on his/her mentored research/capstone project for a period of 10 weekdays and has not applied for a LOA will be considered absent without leave and will be considered to have withdrawn from Harvard Medical School.*

**Application for a Leave**

Students applying for a leave of absence must follow the steps outlined below:

1. Notify your Program Director and the Registrar in writing of your decision to take a leave. *Include the last date you attended class, which must be no more than 30 days before your decision to take a leave.* Indicate the anticipated start and end dates of the leave.
2. The Registrar’s Office will confirm your leave in writing and will provide additional information regarding your official status, a reminder for a student on financial aid to meet with his/her Financial Aid Officer, and other relevant matters. The Registrar will notify all courses in which you are registered and adjust tuition per the refund policy (See Section 6.03).
3. If you are on financial aid, you are required to meet with your Financial Aid Officer and complete a loan exit interview (if applicable).
4. Your Program Director will follow up with you and describe any requirements you must complete before you return. You should update your Program Director periodically throughout your leave.
5. Approximately two months before you plan to return, you should contact your Program Director and the Registrar for additional information regarding your proposed return to school. You must meet all conditions set by your Program Director and/or the Registrar in order to resume studies.
**Resuming Student Status**

Students returning from LOA who wish to apply for financial aid may contact the Financial Aid Office for application materials or visit the Financial Aid Office website at http://hms.harvard.edu/content/financial-aid-harvard-medical-school. Applications are available in March for the following academic year. These materials must be submitted to the Financial Aid Office by May 1st. Students returning at a time other than the beginning of a term may petition to have their financial aid budget revised to reflect actual tuition and expenses for the periods of their student status.

**Important Information about Leaves of Absence**

- **Financial Aid:** Students on a leave of absence are not eligible to receive financial aid.
- **Loan Repayment:** Because students on a leave of absence are not considered to be working toward their degree, the grace (deferral) period for loan repayment may lapse during the leave. For loans with the typical six month grace period, repayment will start after six months of leave and continue through the rest of the leave. For such students, loan repayment will begin immediately after graduation, rather than six months into the first postgraduate year. **Students need to review this information during the financial aid exit interview.**
- **Health Insurance:** Students with HUHS health insurance who go on LOA are eligible to purchase four months of coverage from the first day without coverage to assist with transition of care to a new provider. Please refer to http://huhs.harvard.edu for complete details on health insurance coverage for students on leave or contact Member Services for additional information.

**Special Situations**

- **Medical Leave:** The same steps described above are required for a Medical LOA. In addition, the student must have a physician’s note indicating that taking a leave is appropriate and, when the student is ready to return, a physician’s note of support.
- **Plan of action generated by the Academic Progress and Review Board of the Master’s Programs (APRB):** If the leave of absence is part of a plan generated by action of the APRB, requirements for reinstatement will be developed by the APRB in consultation with a student’s Program Director. The Program Director will discuss the plan with the student.
- **Pregnancy and childbirth during graduate school:** See Section 2.19.

**Involuntary leave of absence [for medical reasons]**

The Dean for Basic Science and Graduate Education may place a student on involuntary leave of absence [for medical reasons] if:

- The student poses a direct threat to the health and safety of him/herself or others or has seriously disrupted others in the student’s residential community or academic environment, and
- The student’s behavior is determined to be the result of a medical condition, or the student refuses to cooperate with efforts deemed necessary by the Harvard University Health Services to evaluate the cause of the student’s behavior or threatening state.
Before placing a student on *involuntary leave of absence [for medical reasons]*, the Dean for Basic Science and Graduate Education will consult with the Program Director and with the director of the Harvard University Health Services.

The student will be notified in writing of the decision to place him or her on *involuntary leave of absence [for medical reasons]* and the reasons for the decision. The student may ask the Dean for Basic Science and Graduate Education, in person or in writing, to reconsider the decision. If the student disputes any of the factual considerations underlying the decision, the Dean for Basic Science and Graduate Education will refer the dispute to APRB for the Master’s Programs for fact finding.

Students who have been placed on *involuntary leave of absence [for medical reasons]* and later request to return to HMS will be required to provide evidence that they are ready to resume their studies and academic responsibilities. Such evidence may include documentation of the student’s attempts to resolve the issues that led to his/her departure through written or verbal contact with the people from whom he/she has received care and/or employers. Consultation with the Harvard University Health Services (HUHS) may be required; such consultation will allow HUHS to advise HMS whether the medical condition that resulted in the behavior or threatening state is under control through treatment or no longer exists. Additional requirements may be put forth as needed. General guidelines for students taking a leave of absence will apply to these cases.

### 2.09 Withdrawal

A student who decides to withdraw from HMS must notify the Registrar’s Office in writing of the decision to withdraw. The letter must indicate the reason for withdrawal and the effective date of withdrawal.

The Academic Progress and Review Board for the Master’s programs, under certain circumstances, may require a student to withdraw or may expel a student. In these cases, the APRB will determine the effective date of withdrawal and notify the student in writing (see Section 4 for more information). The Registrar will be copied on this correspondence.

In either case, the student’s Harvard University ID card must be turned over to the Registrar’s Office and will be deactivated on the effective date of withdrawal. The amount of tuition to be charged will be based on the date of withdrawal and the tuition and fee adjustment schedule (See Section 6.03). Students who withdraw are responsible for paying all outstanding charges on their term bill.

Students receiving financial aid will need to meet with their Financial Aid Officer to discuss implications of withdrawal on student’s financial aid. Students who live in Harvard University housing and withdraw or are required to withdraw from HMS must vacate their housing by the effective date of their withdrawal.

### 2.10 Readmission

Any Master’s student who has withdrawn or has been withdrawn from an HMS Master’s program and wishes to reapply for the Master’s program must follow all of the processes and procedures of the regular admissions process for that program. In addition, applications for readmission must be supported by two
new letters of recommendation as well as by transcripts of any formal academic training taken since leaving HMS.

Former Master’s students who had previously been dismissed (Section 4.04) from an HMS Master’s program by vote of the HMS Faculty Council must petition the HMS Faculty Council for approval to be readmitted to HMS. A letter requesting readmission should be sent to the Dean for Basic Science and Graduate Education as chair of the Academic Progress and Review Board for the Master’s Programs no later than six months prior to the requested readmission date. The letter should specify the reasons for the petition for readmission and must describe all remedial actions and activities undertaken by the former student.

Any Master’s student who was required to withdraw or was dismissed ordinarily may not submit an application for readmission until the next academic year.

Consideration for readmission is given to the record of each applicant, the length of absence, the activities undertaken during the absence, including any remediation activities, and the number of student places available in the program.

Students are encouraged to contact the Program Director before seeking readmission to clarify any courses or exams to be taken, to specify the timeframe or duration to completion of the degree, to confirm consent of the program, and to determine what additional supporting documentation should be submitted with their application.

Readmission, if offered, may be conditional, requiring performance of a specific task at a specific standard, either prior to or following readmission.

To be offered readmission, a student may need to provide evidence of ability to pay tuition during the enrolled terms and should consult the Financial Aid Office regarding financial aid issues related to readmission.

The HMS Master’s programs will not accept more than two applications for readmission from any individual.

2.11 Credit for Work Done Prior to Matriculation

With the Program Director’s approval, Master’s students may be permitted to enroll as Special Students (see Section 2.21 below) in core curriculum courses in advance of matriculation. Tuition will be charged at a per-credit rate.

Students wishing credit for courses taken prior to matriculation should apply directly to the Program Director before or as soon as possible after matriculation at HMS. Credit is not guaranteed, however, and is awarded at the discretion of the Program Director. Students will be required to certify that they have not used these credits for any other degree program. Credit will not be given for any courses completed more than 12 months prior to matriculation.
2.12 Credit for Mentored Research/Capstone Project Conducted Away from HMS

MMSc degree programs require a minimum 32-credit, mentored research component for which the student is assigned to work with a mentor from the HMS faculty. All mentors are reviewed and approved by the program and all mentors shall ensure an appropriate environment for research. Based on the individual student’s needs and objectives, his/her research may be conducted in collaboration with faculty from other entities either within or outside of Harvard University. However, the HMS faculty mentor shall be fully responsible for the student’s progress and evaluation during the conduct of the student’s research.

Master of Discipline degree programs require a four-credit capstone project which might consist of an “externship” away from HMS. Each student shall be assigned to work with a mentor from the HMS faculty and must identify a secondary mentor at the site where the externship takes place. The HMS faculty mentor shall be fully responsible for the student’s progress and for evaluation of the capstone project.

The Program Director must approve all projects conducted away from HMS.

2.13 Transcripts and Enrollment Confirmation Statements

Students may request complete transcripts of their own records or statements certifying their registration at HMS from the Registrar’s Office.

HMS Students: Requests for transcripts must be made in writing with an original signature to the HMS Registrar. Signed requests may be:

- faxed to 617.432.0275
- scanned to registrar@hms.harvard.edu
- mailed to Harvard Medical School Office of the Registrar Gordon Hall, Room 213 25 Shattuck Street Boston, MA 02115
- submitted in person on a completed form (available in the Registrar’s Office) to the Registrar's Office (Gordon Hall 213)

Please allow up to five business days for processing a request. Processing time may vary depending on the time of year and volume of requests; therefore, submitting the request(s) one to two weeks in advance of your deadline is advisable.

2.14 Access to Student Records

Family Rights and Privacy Act of 1974 (FERPA): Annual Notice to Students

Annually, Harvard Medical School informs students of the Family Rights and Privacy Act of 1974 (FERPA), as amended. This Act was designed to protect the privacy of education records, to establish the
right of students to inspect and review their education records, and to provide guidelines for the correction of inaccurate or misleading data through informal and formal hearings.

Information about restricting your directory information through HMS is posted on the Registrar homepage on MyCourses through the link “Directory Restriction.”

Students also have the right to file complaints with The Family Rights and Privacy Act Office concerning alleged failures by the institution to comply with the Act.

See also the Harvard Information Security site and their FAQ on FERPA.

2.15 Advanced Standing Students

Transfers into HMS Master’s programs from other schools are not possible.

2.16 Curriculum Continuity: Policy on Interruption

See Section 2.18 in the Program in Medical Education handbook for the policy on interrupting medical school progress to enroll in a Master’s degree.

It is expected that students enrolled solely in a Master’s program will not interrupt their progress except for the kinds of extenuating circumstances warranting a leave of absence as described above.

2.17 Satisfactory Academic Progress

The academic requirements for Master’s degrees include the satisfactory completion of the student’s Master’s program curriculum at Harvard Medical School as described above (Sections 1.02 and 1.03). The progress of each student working toward a Master’s degree is monitored carefully, and the determination of satisfactory academic progress is reviewed at least annually. At the end of each academic year, students must have academic standing consistent with HMS’s curricular and graduation requirements. The Academic Progress and Review Board for the Master’s Programs (APRB) will review, at least annually, the academic and conduct status of each student. The APRB will review students’ academic and conduct status each semester in one year Master of Discipline programs.

Federal law and regulations require that all students receiving financial assistance maintain satisfactory academic progress. Satisfactory Academic Progress (SAP) is the successful completion of degree requirements according to established increments that lead to awarding the degree within published time limits. The following policy delineates the standards for Satisfactory Academic Progress in HMS Master’s programs, which apply to all matriculated students, whether or not they are recipients of financial aid.

Qualitative Measures of SAP

Each Master’s student at HMS is required to complete successfully all of the required courses, examinations, and scholarly projects required for their specific Master’s program (MMSc: mentored research project; Master of Discipline: capstone project) in order to graduate with the Master’s degree.
Successful completion means that students receive passing grades in Master’s programs with passing grades (A, B, C, or satisfactory) in each course and for the scholarly project as defined by each program. For letter grade courses, students are required to maintain a B average. SAP for the scholarly project is measured as defined by each program and described in Section 1.01 above. HMS Master’s students cannot graduate with a failing or unsatisfactory grade in any required course, including the scholarly project.

_HMS Master’s degree students are expected to meet both academic and professional conduct standards._
See also: Section 2.07 _Policy on Length of Time to Complete the Master’s Degree_

**SAP and Leaves of Absence**

A student may be granted a personal or medical leave of absence for a variety of reasons. The period of leave for which the student has been approved may be excluded from the maximum time frame in which an individual student will be expected to complete the program. However, under no circumstances will a student be allowed to take more than five years from the time of matriculation to complete the requirements for the MMSc degree and no more than three years for the Master of Discipline degree, including leaves of absence (see Section 2.07).

**Review and Notification of Lack of Satisfactory Academic Progress**

The Program Director will review student’s SAP at least once per term and will make a recommendation regarding progression to the next academic year. For one year programs, the Program Director will review student’s SAP once per term. Any student who has not achieved a minimum of a passing grade in all core courses will be required to develop a remedial plan with the Program Director.

The APRB for the Master’s Programs (APRB); Section 4.03), in consultation with the Registrar, will notify annually, in writing, all students who have not met the standards for Satisfactory Academic Progress outlined above (Qualitative Measures and/or Maximum Time Frame). The notification will indicate the nature of the deficiency, any methods that may be available for correcting the deficiency, and any consequences that have resulted or may result, such as Formal Notice, Academic Probation, or Requirement to Withdraw. A student who fails to meet one or more of the standards for SAP (qualitative and/or time frame) is ineligible for financial aid beginning with the term immediately following the term in which the SAP requirements were not met, pending results of the appeal process, outlined below. A designation of Formal Notice can occur for a variety of reasons and does not necessarily affect SAP if the student is still considered to be progressing toward the degree (see Section 4.03).

**Appeals**

Eligibility for continued financial aid will only be re-established if the student subsequently meets Satisfactory Academic Progress requirements, or if the student successfully appeals the decision to the APRB. The appeal must state the reasons for failing to meet SAP requirements, including, if applicable, special circumstances that contributed to the student’s failure to make satisfactory academic progress (e.g., an injury or illness of the student, the death of a relative, or other special circumstances), and the
changes in circumstances that will allow the student to demonstrate Satisfactory Academic Progress at the next evaluation.

The assistance of the student’s Program Director may be sought in the preparation of appeal. A student may also be required to submit a degree audit, course plan, and/or letter from the Program Director. All relevant materials will be presented to the APRB. If the APRB determines that the student’s appeal should be approved, the student’s aid will be reinstated.

Financial Aid Probation

Once an appeal has been approved, a student is placed on financial aid probation and is eligible for financial aid. The Program Director, in conjunction with the student, will develop an academic plan for the student that will ensure, if followed, that the student is able to meet the program’s SAP standards by a specific point of time. Ordinarily, this time frame will be for an academic term. The student is eligible for financial aid during the time frame stated in the academic plan. During this time, the student will be monitored during each term to ensure that the conditions of the academic plan continue to be met. The academic plan may be shared with the APRB in reviewing a student’s status. At the end of the time frame stated in the academic plan, the student must have met the SAP standards. A student who does not comply with each SAP standard by the end of the financial aid probationary period is suspended from financial aid eligibility. A student shall be reinstated for financial aid eligibility when he/she has satisfactorily completed sufficient coursework to meet the standards of progress within the maximum time frames delineated above.

NB: A student who has lost eligibility for financial aid due to deficiencies in satisfactory academic progress cannot automatically regain eligibility by paying tuition for a term or by sitting out a term. Eligibility may be regained only by eliminating all SAP deficiencies at the student’s expense until all requirements of this policy are met.

Withdrawal

Students who are withdrawn from HMS are not making satisfactory academic progress and are not eligible to receive financial aid.

Enforcement

The Offices of the Registrar and Financial Aid, the Program Directors, and the APRB collaboratively shall have the responsibility for monitoring and enforcing Satisfactory Academic Progress. The Program Directors will notify the APRB at the end of each year of any students who are not making satisfactory academic progress. The APRB will determine whether academic sanctions are warranted and will inform the student accordingly. The Financial Aid Office will inform any student whose financial aid has been impacted.
2.18 Student Workload

**Student Workload**

Generally, students who are enrolled full time will take a combination of half-, quarter-, and nanocourses during the fall and spring terms. Some programs require additional coursework in the summer and/or January sessions.

**Course types**

Half course: generally a term-long course earning four (4) credits.

- expected three (3) hours of classroom time each week
- expected 42 total classroom hours
- expected six (6) hours of outside study each week
- expected 84 total outside-study hours
- formal evaluation, such as graded exams, papers, and projects

Quarter course: generally a course earning two (2) credits over a two- to eight-week period of time.

- quarter courses will have expected classroom and outside-study hours of approximately half that of half courses with similar formal evaluation

Short courses that are not defined quarter courses:

- one to two HMS credits would be granted for any of the following short-course formats
  - 30 hours of classroom time in a variety of thematically related short courses, together with a paper written by the student that reflects on the learning experience and is submitted to the Program Director for approval and granting of credits.
  - an intensive one-week short course on a particular topic, together with a paper written by the student that reflects on the learning experience and is submitted to the Program Director for approval and granting of credits.
  - three Division of Medical Sciences nanocourses, meeting for approximately six hours each over a period of two days, with credits granted by DMS upon successful completion of all required assignments.

The minimum credits by type of course are as follows:

- minimum of 16 credits from didactic courses, ordinarily from half and quarter courses
- 16 additional didactic course credits from a mix of half courses, quarter courses, and short courses
- four credits from a capstone project
Maximum Allowed Credits per Month

Didactic courses and capstone experiences

During the period of time in which the student registers only for didactic courses and/or a capstone experience, a maximum of six (6) credits per month may be earned. This policy will be applicable during the summer session (e.g., six credits for didactic courses in July or 12 credits for didactic courses in July and August) or the January session (six credits for didactic courses). Programs may propose to allow students to take six four-credit courses during a spring or fall term, but the need for this heavy course load should be justified in the context of the overall program, and would receive special scrutiny by the Standing Committee on Governance and Oversight of Master’s Degree Programs during its review of the program.

Mentored research

During the period of time in which the MMSc student is engaged in his/her mentored research experience, a maximum of four (4) credits per month or 16 credits per four-month term may be earned. The student may be engaged in his/her mentored research experience full-time or part-time; in either case, the combination of mentored research credits and didactic credits may not exceed 4 credits per month or 16 credits per term. Four credits may also be earned in each summer month and in January.

Time spent commuting, reading, studying, or preparing academically, including such things as preparing for presentations or conferences is not included in the maximum time described above.

*Harvard University Policy on Religious Holidays (Section 7.01)

In accordance with Massachusetts law, any student in an educational institution who is unable, because of his or her religious beliefs, to attend classes or to participate in any examination, study, or work requirement on a particular day shall be excused from any such examination, study, or work requirement. The student shall be provided with an opportunity to make up such examination, study or work requirement, which he or she may have missed because of such absence on any particular day, provided that such makeup examination or work does not create an unreasonable burden upon the School. No fees of any kind shall be charged by the institution for making available to the said student such opportunity. No adverse or prejudicial effects shall result to any student because of his/her availing himself or herself of the provisions of this section.

Monitoring

Monitoring of these guidelines is the responsibility of the Program Directors and the Academic Progress and Review Board for the Master’s Programs.

2.19 Pregnancy and Childbirth

Harvard Medical School is committed to supporting students who have children while participating in Master’s programs and to working with such students to facilitate the completion of their education. Our
goal is to provide options for the student to continue making satisfactory progress toward completion of
the Master’s degree.

A student who becomes pregnant while participating in a Master’s program (or is the spouse or domestic
partner of someone who becomes pregnant) should consult with the Program Director as soon as possible
to develop an appropriate plan of action. Students who expect to go on a leave of absence as a result of
childbirth and are recipients of financial aid must also meet with their financial aid officer. Students are
subject to all policies pertaining to being on a leave of absence should a leave of absence be necessary
(See Section 4.03). We strongly recommend that students consult with their own obstetrician regarding
prevention of potentially harmful exposures in those research environments in which the mentored
research or capstone project would be conducted.

See also: Section 2.07 Policy on Length of Time to Complete the Master’s Degree

2.20 Graduate Student Travel Policy

Students enrolled in HMS Master's programs are required to comply with the Harvard University
Graduate Student Travel Policy. Master's students conducting mentored research/capstone projects away
from Harvard must comply with this policy in order to ensure that Harvard credit is awarded for their
research.

2.21 Special Students

With the permission of the program director, individuals may enroll as non-matriculated students in
certain core courses. Such students may wish to explore new disciplines or build skills and knowledge
that could enable career advancement.

Special students pay for the courses at the then-current tuition rate, are officially registered, and
participate in coursework as a traditional master’s student would.

Special students may obtain an official registrar's transcript of courses and grades received, but they are
not candidates for any degree at Harvard University. Individuals denied admission to a master’s program
at HMS ordinarily cannot apply as a special student for the same academic year.

Special students do not have priority for limited-enrollment courses. Official registration in any course is
subject to the approval of the course’s instructor.

Special students who later apply, and are admitted, to the master’s degree program in which the core
courses were taken may petition for appropriate academic credit earned as a special student to be applied
toward satisfying the requirements of the master’s program. (See Section 2.11, Credit for Work Done
Prior to Matriculation.)
3. Academic Resources

3.01 Office for Graduate Education

The Office of the Dean for Basic Science and Graduate Education provides a central resource to support the students enrolled in the HMS Master’s programs. The office works with students to explore ways to enhance or address aspects of the student experience and with Program Directors to ensure that the needs of students are met and that relevant policies are developed, implemented, and clarified as needed.

The office develops and organizes events for Master’s students throughout the academic year, including a welcome breakfast, a research symposium, and graduation. The office serves as a liaison for students to services, administrative offices, and information throughout the Medical School and the larger university and is a resource to the school and larger community on issues that pertain to the Master’s programs and students.

The office staffs the HMS Standing Committee on Governance and Oversight of Master’s Degree Programs and the Academic Progress and Review Board for the Master’s programs and represents the Master’s programs on the Longwood Emergency Management Team and other Medical School committees as needed. Students are welcome to contact the office about ideas and projects and general issues of student importance or concerns.

Welcome Breakfast

At the start of the academic year, the Office for Graduate Education coordinates an informal breakfast for all Master’s students, Program Directors, faculty, and program staff. The Welcome Breakfast allows incoming students to meet fellow Master’s students and learn about the other Master’s programs at HMS.

Research Day Symposium

Each spring, Master’s students participate in the Research Day Symposium. At the start of the second term, Master’s students are asked to submit abstracts of their mentored research or capstone project to be reviewed by a symposium committee. The committee, which includes student representation, will evaluate the submitted abstracts and choose those to be presented, either orally or by poster, at the Symposium.

Graduation

Graduation at HMS for those Master’s students who have successfully completed their program requirements is held each May, usually on the Tuesday prior to University Commencement. Commencement for Master’s students is generally held off-campus; limited guest tickets are provided. Master’s students are also eligible to participate in University Commencement in Tercentenary Theatre (Harvard Yard) should they wish. Participation requires academic regalia (“cap and gown”) which can be
coordinated through HMS. Graduating students will be contacted by their programs in late Winter/early Spring to determine if they will be attending University Commencement and whether they need to rent regalia. A very limited number of guest tickets will also be available.

3.02 HMS Master’s Programs

1) Bioethics
2) Biomedical Informatics Program
3) Clinical Investigation
4) Global Health Delivery Program
5) Immunology Program
6) Medical Education Program

Descriptions of each program may be found by clicking on the links.

3.03 Registrar's Office

The Registrar’s Office serves the Harvard Medical School educational community by maintaining the official record of each student and by providing appropriate data to further the educational process of the School.

The Registrar’s Office maintains a permanent academic record for every student and, at his/her request, provides transcripts, certifies enrollment, and processes requests for loan deferrals. The Office is responsible for registering each student, processing course drop/add requests, distributing grade sheets, and recording grades and evaluations. The Office keeps an up-to-date address for each student. The Office maintains the permanent record for every graduate and, at his/her request, provides transcripts, verifications of degree conferred, and other material that might be needed for employment or appointment purposes.

The Registrar's Office also maintains and updates the HMS Course Catalog (http://www.medcatalog.harvard.edu/Default.aspx).

Please go to the Registrar's Office website for more information.

3.04 Student Affairs

Programs are responsible for managing all student issues and activities. The Office for Graduate Education may be contacted should the student’s program be unable to resolve any issue.

Office for Graduate Education
Gordon Hall 001
Phone: 617-432-2174
3.05 Office of Recruitment and Multicultural Affairs

The Office of Recruitment and Multicultural Affairs (ORMA), located in TMEC Suite 244 with the Office of Student Affairs, is responsible for providing supportive services to students who are economically disadvantaged and/or from groups underrepresented in health delivery related fields. ORMA also serves as a resource for the LGBT student community. The staff of ORMA are available to students for personal as well as academic counseling.

Office of Recruitment and Multicultural Affairs
TMEC 244
Phone: 617.432.1572
Fax: 617.432.3912

3.06 Advising

Program Directors and program faculty are available to students for advising, information, and guidance. They may provide guidance regarding curricular planning; help direct students to additional faculty and other resources for career planning and enrichment opportunities; and are always available to discuss personal issues and to help guide students, when appropriate, to professional counseling.

3.07 Educational Computing and MyCourses

Computer technology plays an important role in the Master’s programs. Through the MyCourses web portal, students are provided with a rich array of educational materials and course information.

MyCourses

MyCourses, the School's educational web portal, provides a single access point to all educational materials used in the Master’s programs, including class schedules, handouts, syllabi, discussion forums, exams, lecture videos, slide images, and other resources that support the curriculum. In addition, many of the resources available through MyCourses are also available in a format accessible by portable, hand-held devices.

HMS Student Network

More than 150 public personal computers linked to the student educational network are available throughout the Tosteson Medical Education Center. In addition, all tutorial rooms in the TMEC are equipped with computers and large screen display technology, allowing learning resources that support case-discussion to be accessed during tutorial sessions. These computers, which are reserved for students in the MD, PhD, and DMD programs, provide access to a wide array of electronic resources. Master’s students are expected to have their own laptops to connect to the HMS network.

Location of Public Computers

Tosteson Medical Education Center (TMEC)
Skills Areas on TMEC 1, 2 and 3
Academic Societies
Student Computing Center (TMEC Room 225)
TMEC Atrium
Countway Library
Vanderbilt Halls (Room 302B)
HST Medical Education Computer Lab (MIT, building E25)

Computer Equipment Requirement

All Master’s students are expected to have a WiFi-capable laptop computer or mobile device. In order to access HMS’s WiFi network, the operating system of the mobile device must be android 2.3 (or higher) or Apple iOS 4.1 (or higher). Financial concerns related to this requirement: The books & supplies portion of the Master’s student cost of attendance budget is deemed to be sufficient to cover any additional charges incurred by this expense (purchase of phone, increased monthly telephone charges). Budget adjustment requests to increase financial aid for this purpose will not be approved.

Computing Assistance

During the academic year, a full time computer specialist is available 8am to 5pm, Monday through Friday, except Harvard University holidays, and 10am to 2pm on holidays and weekends (excluding the summer months) in the HMS Student Computing Center, techLab (TMEC 225). Specialists are here to help students make the best use of the School's technical resources.

Literature Searching

The Countway Library of Medicine (Section 3.11) provides extensive digital resources (journals, books, databases) and powerful electronic searching tools that are indispensable to medical education. Please check their Website at www.countway.harvard.edu.

Electronic Mail

All students are assigned a personal e-mail account, which provides local and remote access to the School’s e-mail system.

Student Computing Ethics

As in all other areas of your academic life, the use of computing technology should be undertaken in a manner consistent with the high standards of professional conduct. In addition, the internet and electronic mail may create additional challenges to health care professionals’ responsibility for ensuring patient confidentiality. To protect this fundamental patient right, you should avoid using this medium to transmit information containing patient names or other medical records data that may be used to identify individual patients. Strict compliance with patient confidentiality rules and regulations is expected and lapses are subject to disciplinary procedures.

Please see Section 7.09 for guidance on the use of social media.
Getting Help


For more information, go to Student Computing at http://studentcomputing.med.harvard.edu/.

3.08 Master’s Programs Evaluation

Each Master’s program establishes an evaluation process through which students may evaluate their courses. In most cases, this is a formal evaluation at the end of each course with confidential review and compilation of results. Feedback is provided to faculty after grades are submitted and faculty members are encouraged to make improvements in their courses as informed by that feedback.

Some programs require completion of course evaluations by all students. (See Section 1.01)

Some programs have established a “student liaison” who is available to other students for purposes of providing detailed information regarding course content and faculty. The student liaison will filter information and provide feedback to the Program Director. If your program has such a program, the Program Director will provide the contact information for the student liaison to you.

Unprofessional Student Comments in Course Surveys

Harvard Medical School (HMS) regularly solicits student feedback on various aspects of the curriculum in order to improve the educational experience for all students. To that end, we ask that students provide feedback that is candid, constructive, and critical. Each course will implement a confidential course survey process and all course surveys and accompanying comments are withheld from Course Directors until after the course grades have been submitted to the Registrar.

In certain rare cases, however, comments from students cross a clear line from critical to offensive, while possessing no redeeming constructive value. Because these comments are made available to the individual faculty member as well as a number of educational professionals at HMS, unprofessional comments have the potential to inflict real harm on an individual faculty member, which violates a key tenet of professionalism.

A process has been established that will ensure the continued integrity and confidentiality of the course survey process while providing an outlet to address the rare abuses that occur within the system.

In order to achieve this goal, a joint ad hoc committee comprised of three students and two Program Directors will be established to review any comment on a course survey deemed to be unprofessional by a Course Director, instructor, or other relevant official. To ensure that students on this committee represent the will of the student body, student members of this committee will be either elected student representatives or students recommended from a program other than that of the student under review. If a majority of the ad hoc committee agrees that the comment does indeed constitute unprofessional conduct, the Dean for Basic Science and Graduate Education will authorize any relevant parties to override any confidentiality protections and identify the responsible student. This information will be provided.
exclusively to the student’s Program Director, who will determine the appropriate response. The comment will also be redacted from the course survey record.

3.09 The Tosteson Medical Education Center

The Tosteson Medical Education Center (TMEC), located at 260 Longwood Avenue on the Harvard Medical School Quadrangle, opened in September 1987. In recognition of the late Dr. Daniel C. Tosteson's contributions to medical education during his tenure as Dean (1977-1997), the TMEC was named in his honor in June 1997.

The TMEC serves as the locus of undergraduate medical education at HMS. TMEC houses many of the School's instructional areas and Medical-PhD student support offices, as well as computer facilities. Many of the classes for the HMS-based PhD programs are also held in TMEC. A media center provides videotaping capabilities in several of the classrooms.

The Atrium on the second floor, used extensively by students as a gathering area, also provides a small café, open for breakfast and lunch during the academic year. The five Academic Societies of the Program in Medical Education are also housed here.

The Atrium provides access to the Carl W. Walter Amphitheatre, which serves as a lecture hall for large medical, dental, and graduate student courses. A second amphitheatre, located across the quadrangle in the Armenise Building, is also used for lectures. A 90-person tiered classroom designed for interactive teaching—the case method room—is located on the second floor of the TMEC (Room 227). A second 70-person classroom is located diagonally across from the case method room. Adjacent to the case method room is the Student Computing Center (Section 3.07).

Classrooms are made available on a priority basis using the HMS Room Request Form through the eCommons applications page.

3.10 The Academy at HMS and the Academy Center for Teaching and Learning

The Academy at Harvard Medical School advances the education of physicians and scientists throughout the Harvard Medical School community by:

- creating and supporting a community of leaders in education and a culture of excellence in teaching and learning;
- fostering the careers of educators in medicine and science;
- providing programming to improve the skills of teachers;
- stimulating and supporting the creation and implementation of innovative approaches to learning and assessment; and
- supporting educational research and scholarship in medical and graduate education.

In addition to sustaining and building upon the work of the Center for Teaching and Learning (see below), the professional development arm of the Academy, the Academy also works with the evolving educational centers at several of our affiliated hospitals and with the PhD and Master’s programs based at HMS. The Academy supports innovation in pedagogical methods and curriculum and promotes research
that focuses on teaching, learning, and assessment at the undergraduate and graduate medical education levels and in the science education of our graduate students.

The **Academy Center for Teaching and Learning** provides educational development programs for HMS faculty and trainees who are involved in core and elective courses of the Harvard Medical School curriculum. The Center is committed to implementing educational programs for teaching faculty that enhance student learning and ultimately provide for the best care of patients. Throughout the year, the Center sponsors Medical Education Grand Rounds; Medical Education Day; symposia on teaching and learning; new tutor orientation and development programs; and one-on-one faculty consultations. All faculty within the HMS community who teach in classroom or clinical settings are invited to participate in Center activities.

The **Academy Office of Education Research**:  
- fosters faculty development in research related to medical education;  
- carries out funded research to advance the field of medical education;  
- serves as a resource for students pursuing scholarly research projects in medical education; and  
- acts as a coordinating and networking center for medical education research throughout the Harvard medical community.

For more information, please send an e-mail to academy_research@hms.harvard.edu.

### 3.11 Francis A. Countway Library of Medicine

The Francis A. Countway Library of Medicine provides students with a health sciences library, the resources of an advanced biomedical informatics center, extensive contemporary collections, and extraordinary rare books and special materials, housed in the Center for the History of Medicine. The Library’s website ([www.countway.harvard.edu](http://www.countway.harvard.edu)) provides a gateway to Countway’s rich array of programs, services, and resources.

Special features of the Countway include:

- An extensive collection of online resources;  
- A large, comfortable, quiet reading room;  
- Individual study carrels;  
- Group study rooms;  
- Public computers and internet connections, including wireless networking and circulating laptops, e-readers and iPads  
- Scanning of paper to digital formats with delivery via USB drive or e-mail;  
- Electronic and videoconference classrooms for hands-on training;  
- Rare books, special collections and exhibits on the history of medicine; and  
- The Warren Anatomical Museum and a large portrait gallery.
Electronic Access to the Countway and Other Harvard Libraries

The Countway Library website (www.countway.harvard.edu) provides access to biomedical journals, textbooks, databases, and websites that have been selected by expert librarians. Remote access to these resources is available with a Harvard University ID-PIN or HMS eCommons login.

HOLLIS Online Catalogue

Books, journals, and other materials owned by the Harvard Libraries, including 45,000 electronic journals, over 200,000 electronic books, and hundreds of databases, can be located in HOLLIS, the Harvard online library catalog. HOLLIS is accessible via the Countway website.

DASH

Digital Access to Scholarship at Harvard (DASH) is the archiving system through which Master’s theses are archived at Harvard. Students are required to archive their theses; flexibility exists to embargo documents that may be subject to eventual publication. Training on the use of DASH is offered periodically. See http://dash.harvard.edu/ for more information.

Interlibrary Loan

If Countway does not have an article or book, students may submit a request to our interlibrary loan service at nrs.harvard.edu/urn-3:hul.eresource:illiamed. Students using the service for the first time will need to set up an account. To learn more about this service visit www.countway.harvard.edu/ill.

Physical Access to the Library

Access to the Countway Library, located at 10 Shattuck Street, requires a Harvard or affiliated hospital ID. Visitors are asked to register at the guard’s desk.

For library hours, please check the Countway website (https://www.countway.harvard.edu) or call 617-432-4888.

Studying at the Countway

Countway offers study space on floors from L2 to 3. Study carrels overhanging the central atrium and private alcoves on the third floor provide work areas for individuals, laptop connectivity, and quiet. The computer classroom on L2 has 18 MACs and PCs loaded with many software applications and is open for study whenever a class is not in session. The large meeting rooms on the fifth floor are available to student groups and can be scheduled through the HMS room scheduling office at http://hms.harvard.edu/departments/campus-planning-and-facilities/campus-operations/room-scheduling-and-conference-center.
Classes and Training

Countway librarians offer hands-on workshops, lectures, and demonstrations in information management, bioinformatics, database searching, and records management. Online tutorials and customized, on-demand workshops are also available. See the Countway website (https://www.countway.harvard.edu/classes) for a current schedule and registration. Special tours, focused orientations, and off-site training sessions may also be arranged by calling 617-432-2134.

Computer Access

Windows and Mac workstations are located throughout the library and provide access to all of Countway’s web-based resources as well as Microsoft Office software. EndNote, MatLab, SciFinder Scholar, ArcGIS and Photoshop are available on selected computers. Laptops are available from the Circulation Desk for loan while in the library. Several laptops contain special software applications such as STATA, SAS, and Area Resource File for statistical analysis and public health research. (See https://www.countway.harvard.edu/menuNavigation/aboutCountway/publicWorkstations.html for details. The Library is wired for both wireless and Ethernet connectivity throughout the building. A dedicated printer is available for HMS students at computers on the north side of L1; color printing is available on the 2nd floor for 25 cents per page.

Copy/Scan Services

Self-service copy machines are located on floors L1 and 1. Scanners are available on the 1st floor and L2. Crimson Cash (See Section 8.07) from the user’s Harvard ID may be used to make copies, or copy cards may be purchased from a vending machine on the first floor.

Countway Center for the History of Medicine and Warren Anatomical Museum

The Countway Center for the History of Medicine contains one of the most renowned historical collections in the health sciences in the world. Virtually all of the great works in the history of medicine can be found here. Particular strengths are in medical incunabula – books printed before 1501, with over 800 volumes. The Center for the History of Medicine's collection of archives and manuscripts is the largest collection of its kind in the United States. The collection includes the personal and professional records of physicians from the medieval and Renaissance periods through the twentieth century.

The Center’s Warren Anatomical Museum began as the 19th-century teaching collection of Dr. John Collins Warren (1778-1856), a founder of Harvard Medical School. The Museum's present collection contains approximately 13,000 items. Selections from the collection, including the well-known skull of Phineas Gage and the tamping iron that shot through it, are on display throughout the library. The Museum is open to the public and welcomes opportunities for educational use of the collection. Student groups are encouraged to schedule tours or consultations by calling 617.432.6196. To learn more about the Warren Anatomical Museum, its policies and holdings see (https://www.countway.harvard.edu/menuNavigation/chom/warren.html).
For more information on library services, please visit the Countway Library website (https://www.countway.harvard.edu).

### 3.12 Program in Graduate Education

Chaired by the Dean for Basic Science and Graduate Education, the Program in Graduate Education (PGE) was established to provide overarching oversight and structure for all PhD programs in the life sciences in the Longwood area (HMS, HSPH, HSDM). The PGE provides a sense of structure and identity as well as infrastructure for this mission-critical activity – graduate education in biomedical and social sciences. The development of the PGE as an entity is ongoing with effort being dedicated to bringing the different programs together to foster shared interests and program development. The overall process is deliberate and human resource intensive and currently involves ongoing curricular development, program development, oversight of strategic development of programs, and student affairs.

The Dean for Basic Science and Graduate Education is responsible for spearheading the development of new graduate education programs (both Master’s and PhD programs) and providing decanal oversight of all graduate education programs at HMS, including coordinating the relationship between HMS and GSAS (the Harvard School that awards the PhD degree), coordinating the relationship with MIT for the Health Sciences and Technology (HST) program, overseeing both DMS and the MD – PhD program, coordinating periodic internal and external reviews of programs, developing long-term plans, and overseeing the management and financial systems that support the graduate education program. A complete listing of Graduate Education programs may be found at: http://hms.harvard.edu/education/graduate-education.

### 3.13 Division of Medical Sciences

The Division of Medical Sciences (DMS), established at Harvard University in 1908, is designed to provide students wishing to pursue careers in research and teaching with a broad education in basic biomedical science fields and specialization in one of them. Classroom and laboratory instruction are conducted primarily by the 540 faculty members of the basic sciences departments and affiliated hospital laboratories of Harvard Medical School. The PhD degree is awarded by the Graduate School of Arts and Sciences (GSAS) of Harvard University. For the last century, this fruitful collaboration has spawned research achievements across the spectrum, from basic science to experimental medicine. Since 1909, nearly 2,085 Division graduates, including five Nobel Laureates, have gone on to distinguished careers in biomedical research, university teaching, and a number of increasingly diverse careers. For more information, visit the DMS website at http://www.hms.harvard.edu/dms/.

### 3.14 Office for Diversity Inclusion and Community Partnership

The Office for Diversity Inclusion and Community Partnership (ODCP) at HMS was created to promote increased recruitment, retention and advancement of diverse faculty, particularly underrepresented minority faculty, and to oversee diversity activities involving HMS faculty, trainees, students and staff. This is achieved through efforts that:

- support the career development of junior faculty and fellows;
- train leaders in academic medicine and health policy;
• provide programs that address crucial pipeline issues; and
• sponsor awards and recognitions that reinforce behaviors and practices that are supportive of
diversity and faculty development.

In addition, the ODCP’s work includes research and technical assistance leading to national, regional and
local strategies to support workforce diversity and inclusion in the biomedical sciences through the
Harvard Catalyst/Harvard Clinical and Translational Science Center and the ODCP’s Program for Faculty
Development and Diversity. The ODCP also acts as a central resource for monitoring diversity efforts and
outcomes. ODCP’s work also addresses HMS’s relationship with the community through the provision of
programs that link HMS faculty, trainees and students with local, regional and national community-
related activities. For the most part, community activities are complementary to the overall diversity
agenda.

3.15 Harvard University Resources for Students

University-wide resources for all Harvard students can be found on the University-wide Student Resources website at http://www.harvard.edu/students

The following links provide University-wide resources for all Harvard students.

Admissions Contact Information by School
Commencement
Course Catalog
Directions and Parking
Harvard Health Services
Harvard Mobile Apps
Harvard University Police Department
Human Resources
Libraries
Museums
Tours by School

Harvard Guide to Using Sources

The Harvard Guide to Using Sources, a publication of the Harvard College Writing Program that outlines
the fundamentals of using sources in academic papers, can also be found on the University Resources
website or at http://usingsources.fas.harvard.edu/icb/icb.do. Although this resource was designed for
undergraduates at Harvard College, it provides helpful and important information for students at all levels
who are engaged in scholarly writing.

The Guide is designed as a text that should be read from beginning to end. Once you have read the entire
Guide, you will then have a better idea of which sections you will want to review at different points in
your research process. The Guide is divided into six sections:

• "Why Use Sources?" provides an overview of what you will be expected to do with sources in
college writing.
• "Locating Sources" offers a brief introduction to the Harvard libraries.
Variations of questions can be used in non-traditional formats, such as "Evaluating Sources" explains the questions you should ask as you determine whether particular sources are reliable and suitable for your project.

"Avoiding Plagiarism" provides an in-depth explanation of what constitutes plagiarism and how to avoid it.

"Integrating Sources" provides guidance about how to integrate the ideas from sources into your paper.

"Citing Sources" contains citation examples in MLA style and APA style, as well as a link to the Chicago Manual of Style.

---

4. Student Conduct and Responsibility

### 4.00 Principles of Student Conduct and Responsibility

Health-related professions are founded on the highest standards of conduct. In admitting a student to Harvard Medical School, we believe the student already to have demonstrated that her/his behavior in person—both on campus and off—and in her/his electronic presence reflects the maturity and civility that are the necessary underpinnings of his or her chosen profession. After a student is admitted, enrollment remains contingent on a continuation of this high standard of conduct.

### 4.01 Responsibilities of Teachers and Learners

The teacher-learner relationship confers rights and responsibilities on both parties. Behaving in a way that embodies the ideal teacher-learner relationship creates a culture of mutual respect, minimizes the likelihood of student mistreatment, and optimizes the educational experience.

**Responsibilities of Teachers**

- Treat learners fairly, respectfully, and without bias related to their age, race, gender, sexual orientation, disability, religion, or national origin.
- Distinguish between the Socratic method, in which insightful questions are a stimulus to learning and discovery, and overly aggressive questioning, in which detailed questions are repeatedly presented with the end point of belittlement or humiliation of the learner.
- Give learners timely, constructive, and accurate feedback and opportunities for remediation, and submit grades and evaluations within four weeks of the end of a course.
- Be prepared and on time for all activities.
- Provide learners with current material and information and appropriate educational activities.

**Responsibilities of Learners**

Once a student is formally admitted to Harvard Medical School (HMS), our responsibility is to ensure that our graduates meet certain standards of professional conduct and responsibility. These standards include reliability, honesty and integrity, responsibility in professional relationships, responsibility in
relationships with others, including members of the Harvard community, and responsibility related to personal health issues and substance abuse.

Achieving these standards is expected during the student’s tenure at HMS. The School is committed to providing structured opportunities for students to reflect upon—and learn from—lapses in compliance with these standards.

Students will be evaluated repeatedly on the basis of these standards, examples of which include the following:

**Reliability**

- Can be depended upon to do his/her duty as defined by course and program objectives;
- Completes tasks she/he was assigned or agreed to perform;
- Attends, is prepared, and participates in a timely fashion in all scheduled activities, including classes/lectures, tutorials, labs, etc.
- Complies with administrative/regulatory requirements of HMS and affiliated institutions, as well as with all external sites where mentored research and capstone projects may be conducted.

**Honesty and Integrity**

- Is honest and ethical with regard to assignments, examinations, and research activities;
- Acknowledges mistakes, reflects upon them, learns from them, and takes active and effective steps to correct them;
- Adheres to ethical and legal standards of conduct.

**Responsibility in Professional Relationships**

- Knows and acts in accordance with his/her own cognitive, physical, and emotional limitations;
- Takes steps to act on constructive criticism;
- Handles stress appropriately;
- Is considerate and respectful of colleagues, sustaining collegiality faithfully;
- Listens to and maintains effective communication with colleagues;
- In written, voice, e-mail and other electronic communications, including blogs and social media sites, as well as in published writing, reflects thoughtfully and treats fellow students and faculty with mutual respect and understanding;
- Uses professional judgment and respectful language when providing feedback in student surveys about courses and teachers;
- Uses appropriate language and tact in all professional situations;
- Does not make inappropriate demands on colleagues;
- Does not discriminate on the basis of race, color, gender, sexual orientation, religion, age, national origin, ethnic background, political beliefs, veteran status, disability status, or any other improper basis;
• Shows appropriate judgment in responding to unethical, unprofessional, or dangerous behavior on the part of others;
• Comports himself/herself professionally at all times.

Responsibility in Relationships with Patients and Families

Although Master’s students are not involved in patient care as part of their Master’s programs, some Master’s degree students will, while enrolled at HMS, also be licensed clinical care providers with medical or other clinical staff appointments in HMS’s affiliated hospitals or other clinical settings. We require, therefore, that Master’s students abide by these standards of conduct to the extent warranted by their positions.

• Knows and acts in accordance with his/her own cognitive, physical and emotional limitations;
• Is considerate, conscientious, and respectful toward a patient’s and family’s physical needs and emotional concerns;
• Listens to and maintains effective communication with patients and families;
• Uses appropriate language and tact in all professional situations;
• Keeps accurate medical records;
• Maintains patient confidentiality where and when required and in written, voice, e-mail and other electronic communications, including blogs and social media sites, as well as in published writing;
• Does not discriminate on the basis of race, color, gender, sexual orientation, religion, age, national origin, ethnic background, political beliefs, veteran status, disability status, or any other improper basis;
• Is appropriately groomed in all professional situations;
• Maintains appropriate boundaries in the doctor/patient relationship;
• Comports himself/herself professionally at all times.

Responsibility in Relationships with Others, including Members of the Harvard Community

• Abides by all expectations for conduct set forth in the HMS Master’s Programs Student Handbook.

Responsibility Related to Personal Health Issues and Substance Abuse

• Shows appropriate judgment in seeking evaluation and assistance if, as a result of injury, illness, emotional difficulties, or substance abuse, a student’s ability to meet academic responsibilities becomes impaired or potentially impaired;
• Is aware that substance abuse is not compatible with professional conduct;
• Is aware that the use of any substance while engaged in academic activities is not compatible with professional conduct.

Although Master’s degree students at HMS do not have any clinical responsibilities or obligations and may not provide clinical care under the auspices of the Medical School, HMS recognizes that some Master’s degree students will, while enrolled at HMS, also be licensed clinical care providers with medical or other clinical staff appointments in HMS’s affiliated hospitals or other clinical settings. **HMS may consider, as appropriate, allegations that a Master’s student’s ability to meet his or her clinical responsibilities has been impaired or potentially impaired as a result of injury, illness, emotional difficulties or substance abuse.**
**Expectations of Students in Courses**

In an effort to encourage a positive learning atmosphere of respect and good will among you, your classmates and course instructors, the following expectations have been developed:

- **Attend required activities**
  - Notify Course Director if you are unable to attend a required activity

- **Be on time to sessions**
  - Be in your seat and ready to go by the time the class starts

- **Show courtesy to speakers and others**
  - Quiet down when the session starts without needing to be asked
  - If you are late, enter the back; do not walk in front of the speaker

- **Come prepared for class sessions**

- **Complete all assigned readings and other work prior to the session** (whether “lecture,” tutorial, mini-case, laboratory, or focused exercise) at which they will be discussed

- **Participate actively in sessions and give your classmates an opportunity to participate**

- **Use electronic devices appropriately**
  - Laptops/tablets are acceptable for accessing course materials during sessions
  - Sending e-mail, accessing social media, and surfing the web for non-course-related purposes are not acceptable

- **Choose appropriate resources for course study and exam preparation**
  - Resources that are approved by Course Directors may be posted on MyCourses
  - It is not acceptable to use old exams, study guides or tutorial materials handed down by students in previous year’s classes without permission of Course Director
  - It is not acceptable to distribute exams, study guides or tutorial materials to students in classes behind you without permission of Course Director

**4.02 Academic Progress and Review Board for the Master’s Programs**

The Academic Progress and Review Board for the Master’s Programs (APRB) is a subcommittee of the HMS Standing Committee on Governance and Oversight of Master’s Degree Programs (the “Standing Committee”), chaired by the Dean for Basic Science and Graduate Education. The charge to the APRB is to provide periodic review of student academic progress and to hear and adjudicate both progress and conduct issues. The APRB reviews student performance to ensure that each HMS student meets HMS's standards of professional conduct and responsibility and the requirements for graduation.

**Membership**

Members: The Standing Committee will constitute the APRB. The members of the Standing Committee are:

- Program Directors of all programs (or their Standing Committee-approved designees);
- Dean for Basic Science and Graduate Education;
- Dean for Medical Education;
- Dean for External Education; and
- Director of Administration for the Program in Graduate Education
The APRB will determine whether a conflict of interest would preclude any member from participating in discussion or decision-making.

Any Program Director who is not a member of the APRB is invited to attend when a student from that program appears before the APRB.

The APRB considers all difficulties that arise with students’ performance and/or conduct during the course of their Master’s degree programs. The APRB ordinarily will consider employing various mechanisms to remediate difficulties and foster development include, but are not limited to, mentoring, counseling and/or tutoring; allowing time for reflection; requesting written documents; and providing opportunities for demonstration of improvement in performance and/or conduct. A variety of mechanisms, including requiring a leave of absence and various other sanctions, may be employed by the APRB to facilitate the process of professional development.

In cases where academic remediation has been unsuccessful or the APRB determines that no further action on the part of the School or the student can reasonably assure the student’s eventual successful completion of an HMS Master’s degree program, the APRB may require a student to withdraw or may recommend dismissal or expulsion.

4.03 Academic Progress and Review Board and Student Disciplinary Actions

Review by the Academic Progress and Review Board

The Academic Progress and Review Board reviews student grades, evaluations, and reports of academic performance at least twice each year. Performance issues that are raised as a result of the APRB’s review and/or referred to the APRB by the HMS Registrar or by the Program Directors also may trigger review at a meeting of the APRB.

In addition, unprofessional, inappropriate or irresponsible conduct by a student in connection with his or her academic, or extracurricular activities will be considered by the APRB. Such conduct may include, but is not limited to, breaches of trust or confidence in personal actions including cheating, plagiarism, or unauthorized use of materials in academic exercises or examinations; misrepresentations, distortions or serious omissions in data or reports in the mentored research or capstone projects; abuse, misrepresentation, or other improper conduct in relation to colleagues in academic settings; repeated failures to meet assigned obligations in professional or research training programs; and lapses in standards of professional conduct and responsibility. Illegal, unethical, or other behavior inappropriate to the medical, clinical, or scientific profession that is engaged in by a student outside of the Medical School community may also be considered. As noted above, although Master’s degree students at HMS do not have any clinical responsibilities or obligations and may not provide clinical care under the auspices of the Medical School, HMS recognizes that some Master’s degree students will, while enrolled at HMS, also be licensed clinical care providers with medical or other clinical staff appointments in HMS’s affiliated hospitals or other clinical settings and therefore the APRB also may consider, as appropriate, allegations regarding a Master’s student’s unprofessional, inappropriate or irresponsible conduct in a clinical setting.

As stated elsewhere in the Student Handbook, because students are expected to show good judgment and use common sense at all times, not all kinds of misconduct or behavioral standards are codified here.
Evidence of student performance will be considered by the APRB in conjunction with the Program Director in the context of the student’s special problems and/or needs.

Review Process:

The Program Director will first review the each student's academic performance and/or conduct issue and, for issues that fall solely within the Program Director’s purview, develop a remediation plan. Issues for which the Program Director may not take unilateral action will be immediately referred to the APRB, which will review the case and render a decision regarding the student’s status.

Sharing Information about Student Performance or Conduct with Institutions in which Students have Appointments or are Conducting Research

Depending upon the nature and seriousness of the issue, the institution(s) at which the student has an appointment or is conducting research will be notified of the student’s status. The student will be advised of these notifications at the appropriate time.

Sharing Information about Student Performance or Conduct with Course Directors

When a student is placed in certain structured academic categories (see below) or is repeating an academic term, the APRB may inform one or more Course Directors of a student’s past performance in other courses before the student begins a course or program. This action is undertaken to ensure adequate observation and supervision of the student’s performance and to permit a comprehensive evaluation of the student’s progress at the conclusion of the prescribed course work.

Medical or Mental Health Issues

In appropriate circumstances, the APRB may require that a student receive a medical and/or psychiatric evaluation to assess whether a medical or mental health condition may be interfering with a student’s satisfactory academic performance or ability to meet standards of professional conduct. Among other things, such evaluation may inform the APRB’s thinking about whether reasonable accommodations might assist a student. If a student’s presence is deemed to be a potential threat to order, health, safety, or patient care, the Dean for Basic Science and Graduate Education will take any action that is deemed appropriate, including placing the student on temporary leave of absence.

Structured Academic Categories

Based on its review of student performance, the APRB may place a student in any one of eight structured academic categories for remediation and/or sanction. Ordinarily, remedial and/or sanction programs will be implemented by the student’s Program and be monitored by the APRB. The eight structured academic categories include the following:

1. Formal Notice
2. Monitored Academic Status
3. Academic Probation
4. Suspension
5. Voluntary or Involuntary LoA
6. Requirement to Withdraw
7. Dismissal
8. Expulsion

1. Formal Notice

Formal Notice status indicates that a student requires closer monitoring by the Program Director. Formal Notice is designed primarily as a program for remediation tailored to an individual student’s special challenges and/or needs. Each student on Formal Notice is strongly encouraged to work with his or her Program Director to remediate academic difficulties and to employ all available resources of the school to address issues that may have contributed to his/her academic difficulties.

Ordinarily students will be placed on Formal Notice Status for one or more of the following reasons:

- Serious comments of concern from a Course Director or other individual;
- Unsatisfactory or failing grade in a required/core course; or
- Failure to meet HMS standards of professional conduct and responsibility.

Formal Notice is not reported on the student’s official HMS record. It is, however, reported to the APRB, the HMS Registrar, and the Dean for Basic Science and Graduate Education.

2. Monitored Academic Status

Monitored Academic Status (MAS) indicates that a student requires closer monitoring by the school. MAS is designed primarily as a program for remediation tailored to an individual student’s special challenges and/or needs. Each student on MAS is strongly encouraged to work with his or her Program Director to remediate academic difficulties and to employ all available resources of the school to address issues that may have contributed to his/her academic difficulties.

Ordinarily students will be placed on Formal Notice Status for one or more of the following reasons:

- Serious comments of concern from a Course Director or other individual;
- Unsatisfactory or failing grade in a required/core course;
- Requirement to discontinue participation in any course for academic reasons; or
- Failure to meet HMS standards of professional conduct and responsibility.

Students on MAS are encouraged to limit their extracurricular activities in order to focus more on their course of study and will not be granted a leave of absence for other than medical reasons.

MAS is not reported on the student’s official HMS record.
Program Directors will determine when students are eligible to be taken off MAS. Any MAS period is likely to be a minimum of one term, to allow sufficient time for close monitoring of student performance. Any MAS period may be extended past the original period if the Program Director determines that the student requires continued monitoring and the situation does not require more intensive oversight.

During this period, the Program Director will report to the APRB regularly concerning the student's progress.

3. Academic Probation

*Academic Probation* is a formal action by the APRB that changes a student’s status in the School from “good standing” to “academic probation.” Academic Probation is noted permanently in the student’s official HMS record and places a student on notice that his or her academic performance or behavior has created considerable cause for concern and is subject to critical and ongoing evaluation and monitoring.

Ordinarily students will be placed on Academic Probation for one or more of the following reasons:

- Requirement to repeat a term;
- Two or more failing grades in courses;
- Failure of a course while on Formal Notice or Monitored Academic Status;
- Failure to comply with conditions specified by the APRB; or
- Serious or repeated failure to meet the HMS standards of professional conduct and responsibility.

Students on Academic Probation are not allowed to serve on appointed committees at the School, are required to discontinue their extracurricular activities, and are not granted a leave of absence for other than medical reasons. Students are eligible to be taken off Academic Probation when they have completed all conditions specified by the APRB. Any probation period will be a minimum of one term, to allow sufficient time for correction and close monitoring of student performance.

4. Suspension

When the health, safety, or welfare of students, patients, or other members of the HMS community are deemed to be at risk due to the behavior or presence of the student, the Dean for Basic Science and Graduate Education, independently, or at the request of the APRB, will suspend the student from the school or take any other protective action pending the outcome of APRB or other administrative review. Suspension may also be warranted when a student is accused of serious misconduct that requires further investigation;

5. Voluntary or Involuntary Leave of Absence

In certain cases, the APRB may choose to offer a student the opportunity to go on *Voluntary Leave of Absence (LOA)* or to place a student on *Involuntary Leave of Absence (Involuntary LOA)*. Ordinarily this type of APRB-imposed LOA is indicated when remediation has been unsuccessful and time away for extensive academic remediation or medical help is deemed crucial to successful completion of the degree program. A student who has been placed on an APRB-imposed LOA (either voluntary or involuntary) and who subsequently petitions to return to the school will be required to demonstrate to the APRB that the
circumstances that led to the LOA have been addressed satisfactorily. If a leave was necessitated because of health concerns, prior to a student’s return, the student must obtain a medical or psychiatric clearance, as the case may be, from a physician selected by APRB, usually from Harvard University Health Services. At the end of the LOA, the student may request an extension. Extensions must be requested two or more months prior to the end of the LOA and will be considered on an individual basis. An LOA is granted for up to one year with the possibility of a one-year extension, granted on a case-by-case basis after review by the APRB, if a student submits the request before the first year of leave is over. Students who do not return to full-time status at the end of an approved leave and who have not reapplied for a second year of leave are considered to have withdrawn from Harvard Medical School. For more information about LOAs, see Section 2.09.

6. Requirement to Withdraw

Students may be required to withdraw in situations involving repeated failures, when attempts of academic remediation have been unsuccessful, or when students have failed to meet APRB requirements while subject to Formal Notice, Monitored Academic Status, or Academic Probation, or during an APRB-imposed LOA. Students may also be required to withdraw if found to have committed an act of academic dishonesty or for the repeated or gross failure to meet professional standards of conduct. (As noted above, students who do not return to full-time status at the end of an approved leave and who have not reapplied for a second year of leave are considered to have withdrawn from Harvard Medical School.)

Requirement to Withdraw offers the student the opportunity to reapply to the program or apply to programs at other Harvard schools although the official HMS record may be made available to any other schools to which the student applies.

7. Dismissal

Dismissal is an action taken in serious disciplinary cases whereby a student’s connection with the University is ended by vote of the HMS Faculty Council. (The action taken by the APRB is a vote of requirement to withdraw with a recommendation to the HMS Faculty Council that the student be dismissed.) Dismissal does not necessarily preclude a student’s return, but readmission is granted rarely and only by vote of the HMS Faculty Council. A dismissed student is not in good standing until readmitted.

8. Expulsion

Expulsion is the most extreme disciplinary action possible and is triggered by serious misconduct or a continuing pattern of academic and/or behavioral failures that have not been successfully remediated. (The action taken by the APRB is a vote of requirement to withdraw with a recommendation to the HMS Faculty Council that the student be expelled.) Expulsion requires support by a two-thirds vote of the HMS Faculty Council.

A student who is expelled can never be readmitted and restored to good standing.

These Structured Academic Categories are summarized in the charts below.

1. Formal Notice
2. Monitored Academic Status
3. Academic Probation
4. Suspension
5. Voluntary or Involuntary LoA
6. Requirement to Withdraw
7. Dismissal
8. Expulsion

4.04 Appellate Review

A Standing Committee on Rights and Responsibilities (SCRR) comprised of fifteen voting members of the Faculty of Medicine of diverse experience is appointed by the Dean of the Faculty of Medicine. Each member serves a three-year term, with the possibility of reappointment. These terms are staggered so that each year approximately one-third of the Committee will retire and new members will be appointed. The members comprise a diverse group drawn from the voting members of the Faculty who have demonstrated interest and involvement in training or teaching of HMS students.

Members of the SCRR will be designated, as needed, to function as members of the following reviewing bodies:

- Appeals Panel under the Procedures for Consideration of Academic Performance (Section 4.07);
- Appeals Panels under the Procedures for Consideration of Unprofessional Conduct (Section 4.08);
- Grievance and Appeals Panels under the Procedures for Resolving Complaints of Discrimination, Harassment, or Unprofessional Relations and Abuse of Authority (Section 7.16).

When additional or special expertise would be useful, the Dean may designate other members of the senior faculty of the University to serve on these Panels.

Note on cases involving allegations of sexual and gender-based harassment:

As set forth in Section 7.16 of the Handbook, HMS has adopted the University Policy on Sexual and Gender-Based Harassment (the “University Policy”) and allegations of sexual or gender-based harassment against students will be handled in accordance with the University’s Procedures for Handling Complaints Involving Students Pursuant to the Sexual and Gender-Based Harassment Policy (“University Procedures”), which can be found here. In such cases, the Harvard University Office for Sexual and Gender-Based Dispute Resolution (“ODR”) is responsible for determining whether a violation of the University Policy by a student took place. Whenever a formal complaint of sexual or gender-based harassment against an HMS student results in the issuance of a final report from the ODR, the APRB must accept as final and non-reviewable the report’s findings of fact and its conclusions as to whether a violation of the University Policy has occurred. The only opportunity to appeal the findings related to the University Policy is provided by the ODR. Appeals within HMS pertain only to the decision of the APRB in determining discipline.
4.05 General Principles for Consideration of Student Performance and Conduct

These general principles are applicable to the Academic Progress and Review Board for the Master’s Programs (APRB) and the Standing Committee on Rights and Responsibilities (SCRR) and will be employed in consideration of academic performance, unprofessional conduct, and procedures on student rights and responsibilities.

Administrative titles used in describing these procedures may change from time to time. The term “reviewing body” refers to any individual or panel with responsibility for fact-finding or decision-making under these procedures. The term “days” as used herein means business days.

These procedures will be implemented with fairness, objectivity, and thoroughness, and with appropriate regard for the reputation of individuals. To that end, the confidentiality of these procedures will be maintained to the extent consistent with their effective use and with other obligations of the School.

These review procedures are academic, not legal. Any evidence that a reviewing body deems relevant and trustworthy may be considered. Formal rules of evidence do not apply. In any matter, a reviewing body will have access to and may consider a student’s academic or disciplinary record as a whole. A student may be accompanied to any appearance before a reviewing body by an advisor who is a member of the student body, faculty, or administrative staff of the Medical School. Although a student may seek legal advice with respect to these procedures, students may not be represented by an attorney before a reviewing body, and attorneys will not attend interviews of a student or other witnesses by a reviewing body. The Dean of the Faculty, the Dean for Basic Science and Graduate Education, and any other academic leader with responsibility for the Master’s programs (e.g., Dean of Students, Associate Dean for Graduate Education, etc.) may attend any interview or meeting by a reviewing body.

Reviewing bodies are permitted and encouraged to take advantage of University staff and resources, including technical, legal, administrative, and medical resources, in discharging their responsibilities under these procedures. Specifically, counsel for the University may be involved to provide legal advice and staff support to a reviewing body but will not serve in a prosecutorial or other advocacy role. Counsel for the University will not attend interviews of a student or other witnesses by a reviewing body.

Information obtained from the student in confidence by the Harvard University Health Services (HUHS) or other health care provider, whether medical or psychiatric, will neither be sought by a reviewing body nor disclosed to a reviewing body without the student’s consent. The absence of such information may, however, properly preclude the reviewing body from considering a medical excuse, explanation, or justification in a particular case. A reviewing body may require that, in connection with its deliberations or as part of a remedial or corrective action or sanction, a student obtain medical or psychiatric evaluation and/or treatment and may require that the student consent to disclosure of relevant information from that health care provider to the reviewing body or its designee.

At the appellate level, a student may object for good cause, such as evidence of conflict of interest or bias, to the service of any member of a reviewing body. Such objection must be in writing, must fully state the reasons for the objection, and must be received by the Chair of the SCRR within three days after the student is notified of the membership of a reviewing body. The Chair of the APRB or the SCRR may, if warranted, remove and replace a member of a reviewing body.
These procedures may be supplemented or modified, upon prior notice to the student, when necessary to achieve a full and fair resolution of the matter. Remedial and corrective actions and sanctions that may be imposed by the reviewing bodies under these procedures include, but are not limited to, academic remediation, personal counseling, community service, warning, reprimand, censure, probation, requirement to withdraw, dismissal and expulsion.

For disciplinary cases in which the sanction is dismissal or expulsion from the Medical School, a two-thirds vote of the Faculty Council is required. When the remedial or corrective action or sanction is probation of any kind, the decision of the reviewing body must specify the conditions and duration of the probation and the conditions for its termination. The reviewing body is responsible for assessing the satisfactory completion of the conditions of any probation and for terminating it. Imposition of a remedial or corrective action or sanction under these procedures may be included in any reference letters and given the weight that the Program Director and the Dean for Basic Science and Graduate Education determine that the action/sanction deserves in the context of that letter.

Withdrawal or Leave of Absence during Pendency of a Disciplinary Proceeding

The transcripts of students who are withdrawn or placed on a leave of absence from a Master’s program pending the outcome of disciplinary proceedings will contain an appropriate notation.

These procedures may be reevaluated and/or revised at any time.

4.06 Falsification of Admissions Application

Occasionally candidates for admission will make inaccurate or misleading statements or submit false material in connection with their application. In most cases, these misrepresentations are discovered during the admission process, and the application is rejected. If a misrepresentation is discovered after a candidate is admitted, the offer of admission is withdrawn. If a misrepresentation is discovered after a student has registered, the offer of admission will be revoked, and the student will be required to leave the School. If the discovery occurs after a degree has been awarded, the degree will be rescinded. The determination that an application is inaccurate or contains misrepresentations rests with the individual Master’s programs in consultation with the Dean for Basic Science and Graduate Education, which have the authority to resolve the matter outside the student disciplinary process.

4.07 Procedures for Consideration of Academic Performance

Faculty and staff of the Registrar’s Office, the programs, and the Academic Progress and Review Board for the Master’s Programs (APRB) regularly review all grades, evaluations, and reports of academic performance. In the case of a student who shows an initial performance deficiency, or when concerns arise about inappropriate or irresponsible conduct, the student’s program will prepare a plan of remedial action with the student within a reasonable period of time.

Each program will monitor the student’s progress with the remediation plan. If the deficiencies continue or are repeated, the APRB will take up the case officially. The APRB will review the student’s record and current situation in consultation with the student’s program and will determine a course of action that may include, but is not limited to, placement in any of the previously indicated structured academic categories.
(Section 4.03). The student will be notified in writing of the decision of the APRB. A copy of such notice will be sent to the student’s Program Director, the Dean for Basic Science and Graduate Education, and the Registrar. The student and/or Program Director may be asked to respond to the stated concerns of the APRB.

Any student who is required to withdraw (and/or may be dismissed or expelled) as a result of the APRB’s deliberations will have the opportunity to appear before the APRB to present his or her account of the case.

Any student who is required to withdraw (and/or may be dismissed or expelled) as a result of the APRB’s deliberations may apply to the APRB to reconsider its decision. The application must be in writing and must introduce new information or elucidate different grounds upon which reconsideration is requested. The application must be received by the APRB within 10 business days of the student’s receipt of notice of the decision for requirement to withdraw or expulsion.

The APRB may consult with HMS faculty and/or administrators or conduct other fact finding to better understand the new information or different grounds upon which the student has requested reconsideration. The APRB will then meet to discuss the case. Ordinarily the student will be permitted to attend this meeting and may make a presentation to the APRB. After reviewing the application for reconsideration, the APRB may affirm, revise (make more or less severe), or revoke its decision. Written notification of the action on reconsideration will be sent to the student, to his or her Program Director, and to the HMS Registrar, ordinarily within 10 business days of the meeting at which the application was considered and the decision was rendered. Such notification will constitute the final action of the APRB.

A student may appeal the final action of the APRB to a three-member Appeals Panel designated by the Chair of the Standing Committee on Rights and Responsibilities (SCRR; Section 4.04) in consultation with the Chair of the APRB. The student’s appeal must be in writing and must contain a full statement of the reasons upon which an appeal is requested. The Appeals Panel must receive the appeal within 10 business days of the date of final action by the APRB. The Appeals Panel will hear the student in person and will review the documentary record. The Appeals Panel may adduce and consider any other information it deems useful in reaching a decision. The Appeals Panel will submit a written report of its findings and recommendations to the Dean for Basic Science and Graduate Education. In so doing, the Appeals Panel may affirm, revise (make more or less severe), or revoke the final action of the APRB.

The student may request review of the decision of the Appeals Panel by the Dean of the Faculty of Medicine. The Dean of the Faculty of Medicine must receive any such request for review within five business days of the date of the decision of the Appeals Panel. The Dean of the Faculty of Medicine will review the matter, in consultation with the Dean for Basic Science and Graduate Education, Program Director, or others (e.g., the Faculty Council) if he wishes, and will provide written notice of his decision to the student, his/her Program Director, the Dean for Basic Science and Graduate Education, the HMS Registrar, and the APRB. The Dean’s decision will be final and binding, except in cases of dismissal or expulsion, in which a two-thirds vote of the Faculty Council is required.
Withdrawal or Leave of Absence during Pendency of a Disciplinary Proceeding

The transcripts of students who are withdrawn or placed on a leave of absence from the Master’s program pending the outcome of disciplinary proceedings will contain an appropriate notation.

Student Disagreement with Grades or Evaluations

A student’s disagreements with grades, evaluations, or reports of academic performance should be raised with the Course Director, who has ultimate authority over such grades, evaluations, and reports in his or her course. If such disagreements are not satisfactorily resolved, the student may then bring the concerns to the attention of his/her Program Director, who may consult with the Course Director to discuss the appropriateness of the grade, evaluation, or report in order to help the student understand the basis for the grade, evaluation, or report. In all such cases, the decision of the Course Director is binding.

4.08 Policy and Procedures for Consideration of Unprofessional Conduct

Behavior that raises serious doubts about the integrity, character, and faithfulness of a student in meeting the obligations of her/his professional career is considered inappropriate or unprofessional conduct. Illegal, unethical, or other behavior inappropriate to the student’s profession that is engaged in by a student outside of the Medical School community may also be considered and addressed under these procedures. It is the expectation of the Medical School that all students, whether or not they are on campus or are currently enrolled as degree candidates, will behave in a mature and responsible manner. This expectation for mature and responsible conduct also encompasses accountability for one’s own well-being, including responsible decision-making regarding physical and mental health. Further, the Medical School expects every student to be familiar with the regulations governing membership in the Harvard community. Because students are expected to show good judgment and use common sense at all times, not all kinds of misconduct or behavioral standards are codified here. See generally, Section 4.01, Responsibilities of Teachers and Learners, and Section 7.21, University-Wide Statement on Rights and Responsibilities. NOTE: In the case of cross registration, although Master’s students must abide by the policies of the school/institution in which the student is cross-registered, any disciplinary actions or processes will fall under the jurisdiction of the Medical School.

When information suggesting the possibility that a student has engaged in inappropriate or unprofessional conduct is brought to the attention of the Dean for Basic Science and Graduate Education, the Program Director, the Academic Progress and Review Board for the Master’s Programs (APRB), or any other academic leader with responsibility for the Master’s programs (e.g., Dean of Students, Associate Dean for Graduate Education, etc.) the APRB will take up the matter formally. Where the health, safety, or welfare of students, patients, or other members of the Medical School community is deemed to be at risk, the Dean for Basic Science and Graduate Education will suspend the student from the Medical School or take any other protective action pending the outcome of these procedures.

When information suggesting the possibility of conduct inappropriate to the student’s profession implicates both the rules and functions of the APRB and the Procedures for Resolving Complaints of Discrimination, Harassment, or Unprofessional Relationships and Abuse of Authority (http://hms.harvard.edu/content/procedures-resolving-complaints), the APRB, in consultation with the HMS Ombudsperson when appropriate, will determine which procedure will apply, but ordinarily the
matter will be handled by the APRB. When a student’s behavior raises both academic and professional conduct concerns, ordinarily the matter will be handled under the Procedures for Consideration of Unprofessional Conduct. When both the Procedures for Consideration of Unprofessional Conduct and the Procedures for Resolving Complaints of Discrimination, Harassment, or Unprofessional Relationships and Abuse of Authority may apply, ordinarily the matter will be handled under the Procedures for Consideration of Unprofessional Conduct. In all such cases, however, to the extent that the allegations implicate the University Policy on Sexual and Gender-Based Harassment, they shall be handled under the University Procedures for Handling Complaints Involving Students Pursuant to the Sexual and Gender-Based Harassment Policy as set forth below.

When the student is cross-registered in a course in another School and/or is simultaneously a candidate for a degree in another School, the Program Director, in consultation with the Dean for Basic Science and Graduate Education will consult with that School to decide which School will take primary responsibility for resolving the question of unprofessional conduct and will determine a common action before advising the student. When further action by the Medical School is required, the student will be notified in writing by the Program Director.

**For allegations of sexual and gender-based harassment:**

When the information suggesting the possibility of conduct inappropriate to the student’s profession involves allegations of sexual or gender-based harassment, then, as set forth in Section 7.16 of the Handbook, the University Policy on Sexual and Gender-Based Harassment (the “University Policy”) applies, as do the University’s Procedures for Handling Complaints Involving Students Pursuant to the Sexual and Gender-Based Harassment Policy (“University Procedures”), which can be found here. In such cases, under the University Procedures, the Harvard University Office for Sexual and Gender-Based Dispute Resolution (“ODR”) is responsible for determining whether a violation of the University Policy by a student took place. HMS remains responsible for Master’s student discipline through the APRB. All members of the APRB will receive appropriate training in the handling and resolution of allegations of sexual or gender-based harassment.

When the APRB learns that a formal complaint has been filed with ODR, an APRB representative will meet with the respondent to explain, among other things, the disciplinary process that may take place following the issuance of the ODR’s final report, the range of disciplinary sanctions, and the appeals process following the imposition of any discipline. The APRB representative will also be available to meet with the complainant.

Whenever a formal complaint of sexual or gender-based harassment against an HMS student results in the issuance of a final report from the ODR, the APRB must accept as final and non-reviewable the report’s findings of fact and its conclusions as to whether a violation of the University Policy has occurred. The APRB may interview the student and may undertake any other action it deems necessary to arrive at its conclusions, including consulting with senior faculty or administrators at the University when it feels additional expertise or advice would be useful. The complainant will have the option of meeting with the APRB, but is not required to do so. However, the APRB’s disciplinary proceedings against the student based on conduct addressed by the ODR’s final report will proceed with the understanding that the final report carries the same validity as a determination reached by the APRB itself. The role of the APRB is solely to determine the appropriate disciplinary response. The APRB may take a number of disciplinary actions, including probation, with or without requirements or restrictions; suspension; and requirement to
withdraw, with or without a recommendation to dismiss or expel. When no violation of the University Policy has been found, the APRB will review the factual findings contained in the final report. Should the APRB conclude that the alleged conduct, while not a violation of the University Policy, might violate other HMS policies or expectations for conduct, then the APRB will take up the case as set forth below. Once an outcome has been reached, an appropriate representative of the Medical School will notify the student and the complainant of the disciplinary decision.

Any student who is required to withdraw or is expelled as a result of the APRB’s deliberations may request in writing that the APRB reconsider its decision. The request for reconsideration may not challenge the validity of the findings and conclusions contained in the ODR final report, nor may it introduce facts that could have been presented in the course of the ODR investigation or that conflict with any of the findings in the ODR final report. The request must be received by the APRB within 10 business days of the student’s receipt of notice of the decision on remedial action or sanction.

If it chooses to reconsider, the APRB may affirm, revise (make more or less severe), or revoke its decision. Written notification of the action on reconsideration will be sent to the student, to his or her Program Director, and to the HMS Registrar, ordinarily within 10 business days of the meeting at which the request was considered and the decision was rendered. Such notification will constitute the final action of the APRB.

Any student who is required to withdraw or is dismissed, or is expelled may appeal the final action of the APRB to a three-member Appeals Panel designated by the Chair of the Standing Committee on Rights and Responsibilities (SCRR; Section 4.04) in consultation with the Chair of the APRB. All members of the Appeals Panel will receive appropriate training in the handling and resolution of allegations of sexual or gender-based harassment. The student’s appeal must be in writing and must contain a full statement of the reasons upon which an appeal is requested. The Appeals Panel must receive the appeal within 10 business days of the date of final action by the APRB. The Appeals Panel will hear the student in person and will review the documentary record. The complainant will have the option of meeting with the Appeals Panel, but is not required to do so. The only role of the Appeals Panel is to review the disciplinary actions taken by the APRB; the Appeals Panel will accept as true and non-reviewable the findings of fact and conclusions within the ODR final report. The Appeals Panel will submit a written report of its findings and recommendations to the Dean for Basic Science and Graduate Education. In so doing, the Appeals Panel may affirm, revise (make more or less severe), or revoke the final action of the APRB.

Both the student and the complainant may bring a personal advisor to any interviews with the APRB or the Appeals Panel. A personal advisor should be an officer of the University who is affiliated with HMS but may not be related to anyone involved in the complaint or have any other involvement in the process. Personal advisors may view a redacted version of any documents provided to the parties and provide general advice. During interviews, personal advisors may not speak for their advisees, although they may ask to suspend the interviews briefly if they feel their advisees would benefit from a short break.

Finally, the student may request review of the decision of the Appeals Panel by the Dean of the Faculty of Medicine. The Dean of the Faculty of Medicine must receive any such request for review within five business days of the date of the decision of the Appeals Panel. The Dean of the Faculty of Medicine will review the matter, in consultation with the Dean for Basic Science and Graduate Education, the Program
Director, or others (e.g., the Faculty Council) if he wishes, and will provide written notice of his decision to the student, his/her Program Director, the Dean for Basic Science and Graduate Education, the HMS Registrar, and the APRB. The Dean’s decision will be final and binding, except in cases of dismissal or expulsion in which a two-thirds vote of the Faculty Council is required. The complainant will be notified of the final disciplinary decision.

For all other allegations:
When, after an initial review of the information suggesting possible inappropriate conduct, further action is deemed necessary by the APRB, the APRB may appoint an independent fact-finder. The fact-finder will be a Harvard administrator or faculty member drawn from the Medical School or elsewhere. The fact-finder may also be an independent contractor engaged by Harvard. The fact-finder will interview the student and may interview other individuals with relevant knowledge, solicit written statements, review the documentary record, and undertake whatever action is required to elucidate the relevant facts. At the conclusion of his/her inquiry, the fact-finder will prepare a written report describing the inquiry process and his/her findings of fact, identifying any disputed facts. Ordinarily, it is expected that fact-finding will be completed within thirty days, though this timeframe may be extended under extenuating circumstances, including but not limited to complex fact patterns, large numbers of witness interviews, and/or difficulty in scheduling witness interviews. The fact-finder’s report will be submitted to the APRB. The student will also be provided with a copy of the report for his/her written comments. Any comments must be submitted to the APRB within 10 days of receipt of the fact-finder’s report.

The APRB will review the student’s record and current situation in consultation with the student’s Program Director and will determine a course of action that may include, but not be limited to, placement in any of the previously indicated structured academic categories (Section 4.03). In matters of consideration of unprofessional conduct, the APRB may also interview the student and may undertake any other action it deems necessary to arrive at its conclusions, including consulting with senior faculty or administrators at the University when it feels additional expertise or advice would be useful. The APRB may take a number of disciplinary actions including: probation, with or without requirements or restrictions; suspension; and requirement to withdraw, with or without a recommendation to dismiss or expel.

The student will be notified in writing of the decision of the APRB. A copy of such notice will be sent to the student’s Program Director, the Dean for Basic Science and Graduate Education, the Dean for Students, and the HMS Registrar. The student and/or Program Director may be asked to respond to the stated concerns of the APRB.

Any student who is required to withdraw or is dismissed or expelled as a result of the APRB’s deliberations may request that the APRB reconsider its decision. The request must be in writing and must be based on one or both of the following grounds: a procedural error occurred that may change the outcome of the decision; or the student has substantive and relevant new information that was not available at the time of investigation and that may change the outcome of the decision. Disagreement with the APRB’s findings or determination is not, by itself, a ground for appeal. The request must be received by the APRB within 10 business days of the student’s receipt of notice of the decision on remedial action or sanction.
If it chooses to reconsider, the APRB may affirm, revise (make more or less severe), or revoke its decision. Written notification of the action on reconsideration will be sent to the student, to his or her Program Director, and to the HMS Registrar, ordinarily within 10 days of the meeting at which the request was considered and the decision was rendered. Such notification will constitute the final action of the APRB.

Any student who is required to withdraw or is dismissed or expelled may appeal the final action of the APRB to a three-member Appeals Panel designated by the Chair of the Standing Committee on Rights and Responsibilities (SCRR; Section 4.04) in consultation with the Chair of the PRB. The student’s appeal must be in writing and must contain a full statement of the reasons upon which an appeal is requested. The Appeals Panel must receive the appeal within 10 business days of the date of final action by the APRB. The Appeals Panel will hear the student in person and will review the documentary record. The Appeals Panel may adduce and consider any other information it deems useful in reaching a decision. The Appeals Panel will submit a written report of its findings and recommendations to the Dean for Medical Education. In so doing, the Appeals Panel may affirm, revise (make more or less severe), or revoke the final action of the APRB.

The student may request review of the decision of the Appeals Panel by the Dean of the Faculty of Medicine. The Dean of the Faculty of Medicine must receive any such request for review within five business days of the date of the decision of the Appeals Panel. The Dean of the Faculty of Medicine will review the matter, in consultation with the Dean for Basic Science and Graduate Education, Program Director or others (e.g., the Faculty Council) if he wishes, and will provide written notice of his decision to the student, his/her Program Director, the Dean for Basic Science and Graduate Education, the HMS Registrar, and the APRB. The Dean’s decision will be final and binding, except in cases of dismissal or expulsion in which a two-thirds vote of the Faculty Council is required.

**Withdrawal or Leave of Absence during Pendency of a Disciplinary Proceeding**

The transcripts of students who are withdrawn or placed on a leave of absence from a Master’s program pending the outcome of disciplinary proceedings will contain an appropriate notation.

**Procedure on Unprofessional Student Comments in Course Surveys**

Harvard Medical School (HMS) regularly solicits student feedback on various aspects of the curriculum in order to improve the educational experience for all students. To that end, we ask that students provide feedback that is candid, constructive, and critical. Each course will implement a confidential course survey process and all course surveys and accompanying comments are withheld from Course Directors until after the course grades have been submitted to the Registrar.

In certain rare cases, however, comments from students cross a clear line from critical to offensive, while possessing no redeeming constructive value. Because these comments are made available to the individual faculty member as well as a number of educational professionals at HMS, unprofessional comments have the potential to inflict real harm on an individual faculty member, which violates a key tenet of professionalism.
A process has been established that will ensure the continued integrity and confidentiality of the course survey process while providing an outlet to address the rare abuses that occur within the system.

In order to achieve this goal, a joint *ad hoc* committee comprised of three students and two Program Directors will be established to review any comment on a course survey deemed to be unprofessional by a Course Director, instructor, or other relevant official. To ensure that students on this committee represent the will of the student body, student members of this committee will be either elected student representatives or students recommended from a program other than that of the student under review. If a majority of the *ad hoc* committee agrees that the comment does indeed constitute unprofessional conduct, the Dean for Basic Science and Graduate Education will authorize any relevant parties to override any confidentiality protections and identify the responsible student. This information will be provided exclusively to the student’s Program Director, who will determine the appropriate response. The comment will also be redacted from the course survey record.

### 4.09 Academic Dishonesty and Plagiarism

All work submitted for credit is expected to be the student’s own work. In the preparation of all papers and other written work, students should always take great care to distinguish their own ideas and knowledge from information derived from other sources. The term “sources” includes not only published primary and secondary material, but also information and opinions gained directly from other people (See *Harvard Guide to Using Sources* in Section 3.15: Harvard University Resources for Students).

The responsibility for learning the proper forms of citation lies with the individual student. Quotations must be properly placed within quotation marks and must be fully cited. In addition, all paraphrased material must be completely acknowledged. Whenever ideas or facts are derived from a student’s reading and research, the sources must be indicated.

The amount of collaboration with others that is permitted in the completion of assignments can vary, depending upon the policy set by the Course Director or the research mentor. Students must assume that collaboration in the completion of assignments is prohibited unless explicitly permitted by the instructor. Students must acknowledge any collaboration and its extent in all submitted work.

Students who are in any doubt about the preparation of academic work should consult with their course instructor and/or Program Director before it is prepared or submitted.

Students are expected to record honestly and accurately the results of all their research. Falsification of research results includes misrepresentations, distortions, or serious omissions in data or reports on research and is considered a serious violation of academic honesty.

*Plagiarism, fabrication and/or falsification of research results ordinarily will result in the student’s requirement to withdraw, dismissal or expulsion.*

The School is deeply concerned for the integrity of science conducted by students and faculty and with sound and safe research practices. Student and faculty researchers are, individually and collectively, expected to safeguard and maintain the University’s policies and practices and to avoid scientific misconduct. Students taking part in research involving human subjects or research involving the use of
animals must comply with all Federal, State, and University policies. Questions about these compliance obligations should be directed to the HMS Office for Research Subject Protection at 617-432-3192 or http://www.hms.harvard.edu/orsp. All researchers are reminded that sponsoring agencies also have such concerns, that the School must inform sponsors of serious transgressions of sponsors’ policies as well as of any investigations related to sponsored research and that sponsors may take action independent of HMS. See also Section 10.04, Office for Research Subject Protection. For additional information, see the Harvard Guide to Using Sources in Section 3.15.

4.10 Violation of Examination Rules

No communication is permitted between students during an examination, and no student is permitted to bring books, papers, or electronic devices of any kind into an examination, except with the express permission of the instructor or proctor. Eating and drinking are not permitted in any examination room.

For violation of the examination rules or dishonesty in an examination, a student may be required to withdraw from the Medical School. Students who fail to obey the instructions of an examination proctor are liable to disciplinary action.

4.11 Submission of Written Work

Students are responsible for ensuring that required written course work is submitted and received on time. Written work should not be left in open mailboxes or other unattended places but rather given personally and directly to the Course Director or other faculty member or school administrator designated to act on his or her behalf. Written work that is mailed to instructors should be sent by certified mail and a receipt of delivery should be requested from the Postal Service. The student should keep both the postal receipt and a copy of the written work. Written work that is sent through an e-mail system should be transmitted with a ‘receipt requested’ notification. Papers submitted through the MyCourses Assignment Upload function are automatically tracked and require no further record-keeping by the student.

4.12 Submission of the Same Work to More than One Course

Students who wish to submit the same or similar work to more than one course must get prior written permission from both or all of the instructors involved. Instructors expect that each paper or exercise submitted is written specifically for that assignment. Under that assumption, failure to obtain prior written permission can be deceptive and students who fail to do so may be required to withdraw from his/her Master’s program at Harvard Medical School (HMS). Instructors do not always give permission, and, even if permission is granted, they may ask for a longer or a somewhat different product than they expect from students who produce work solely for a single course. Thus, clarifying the expectations for the assignment in advance of the work’s due date(s) is essential.

Each instructor should write a letter to the HMS Registrar giving permission for the student to submit the material to meet course requirements in more than one class. The student may draft a letter giving permission for the paper to be submitted to both classes and have both instructors sign the letter. These letters will be placed in the student’s academic folder.
4.13 Library Policies

A student who violates the lending policies of any Harvard University library may be subject to disciplinary action. In particular, removal of a book or journal from any University library without authorization, or mutilation, defacement, or abuse of any library book or library resources will ordinarily lead to disciplinary action.

4.14 Conflict of Interest

Harvard Master’s students must abide by the Harvard Medical School (HMS) Faculty Policy on Conflicts of Interest Commitment in all activities, including research toward a degree. In particular, the research project cannot be affected adversely by any contractual or other financial obligations of the principal investigator or mentor. Students should check with their Program Director and/or research mentor when planning such activities to make sure they are in compliance with HMS policy.

Policy on Disclosure of Potential Conflicts of Interest Related to the Pharmaceutical Industry and Undergraduate Medical Education

Conflicts of interest are becoming of increasing concern to our students, our faculty members, and to the public.

Faculty and students must disclose any financial interests they may have in a pharmaceutical, biotechnology, medical instrument/device company, or other business which owns or has a contractual relationship to the subject matter being reported or discussed in a presentation, lecture, tutorial, paper, or other teaching exercise or assignment. For example, faculty who have received research support or who have consulted for a pharmaceutical company and whose teaching includes a discussion of drugs developed by that company should disclose the association in advance. Each instructor must disclose whether or not any potential conflict exists and, if a potential conflict exists, the nature of the relationship. Faculty who teach in the Master’s programs will be required to determine and declare any such conflicts and report them to students.

Faculty members and students who have any questions about what to disclose may contact Gretchen Brodnicki, Dean for Faculty and Research Integrity (gretchen_brodnicki@hms.harvard.edu or 617-432-2496).

Policy on Sponsorship, Gifts, Meals, and Access of Pharmaceutical Representatives to the HMS Campus

Sales and marketing representatives of pharmaceutical companies, medical device companies, and medical supply companies are not permitted to visit or interact with students on the HMS campus, and pharmaceutical, medical device or medical supply company sponsorship of student events is strictly prohibited. Master’s students may not accept any gifts from pharmaceutical, medical device or medical supply companies, and these companies may not provide meals or refreshments for any student function.
4.15 Policy Regarding Drugs and Alcohol

The following policy statement on drugs and alcohol is designed to address the University’s concerns about substance abuse and to ensure that the Harvard community complies with the Federal Drug-Free Workplace Act of 1988 (the “Drug-Free Workplace Act”) and the Drug-Free Schools and Communities Act Amendments of 1989 (the “Drug-Free Schools Act”; collectively, the “Acts”).

Violations of laws relating to controlled substances or alcohol are prohibited in or on Harvard premises, in vehicles provided by Harvard, at any site or location at which University duties are being performed by Harvard students, or as a part of any of Harvard’s activities. Common examples of controlled substances, as defined by law, are cocaine, marijuana, and heroin. To acquaint members of the Harvard community with the applicable laws, the University’s Office of the General Counsel (http://www.ogc.harvard.edu/) has prepared a description of local, State, and Federal laws concerning drugs and alcohol, which follows.

The University will take disciplinary action against violators, consistent with Federal, State, and local laws. Such action may include requiring satisfactory participation in a substance abuse treatment, counseling, or education program as a condition of reinstatement or continued enrollment at Harvard; suspension; requirement to withdraw; dismissal or expulsion; and referral for prosecution.

Substance abuse is potentially harmful to health. Because of the considerable health risks involved in drug and alcohol use, resources are available to assist the Harvard community in understanding and dealing with drug and alcohol abuse problems. Harvard students can learn about the dangers of substance abuse and get information about treatment and counseling options available to the Harvard community through the Harvard University Health Services, which is part of Harvard’s ongoing efforts to maintain a drug-free environment. Any member of the University community may use the Harvard University Health Services on an emergency basis at any time, day and night (Section 9.02).

Any Master’s student who is also a physician and has a concern about drug or alcohol use may contact the Physician Health Services at the Massachusetts Medical Society (see Section 9.10 for more information).

4.16 Policies Regarding Hazing

Students are advised that Massachusetts law expressly prohibits any form of hazing in connection with initiation into a student organization. The relevant statutes are provided below. The law applies to all student groups, whether or not officially recognized, and to practices conducted both on- and off-campus. Each student organization must file with the Office of Student Affairs “an attested acknowledgment that such organization understands and agrees to comply with these provisions” that has been signed by the head of the student organization.

The term “hazing,” under Massachusetts law, means: “any conduct or method of initiation… which willfully or recklessly endangers the physical or mental health of any student or other person.” The definition specifically includes “whipping, beating, branding, forced calisthenics, exposure to the weather, forced consumption of any food, liquor, beverage, drug or other substance, or any other brutal treatment or forced physical activity which is likely to adversely affect the physical health or safety of any such student or other person, or which subjects such student or other person to extreme mental stress, including extended deprivation of sleep or rest or extended isolation.” [Massachusetts General Laws, c. 269 § 17]
Notwithstanding any other provisions of this section to the contrary, consent shall not be available as a defense to any prosecution under this action. The failure to report hazing also is illegal, under Massachusetts law.

Hazing is a crime punishable by fine and/or imprisonment. The Medical School will consider all reports of hazing, taking disciplinary action in appropriate cases, and will report confirmed incidents to appropriate law enforcement officials. If you have any questions about the hazing law or have concerns about an incident you have witnessed, please contact the Office of Student Affairs at Harvard Medical School.

Massachusetts Hazing Statute

Section 17. Whoever is a principal organizer or participant in the crime of hazing, as defined herein, shall be punished by a fine of not more than three thousand dollars or by imprisonment in a house of correction for not more than one year, or both such fine and imprisonment.

The term “hazing” as used in this section and in sections eighteen and nineteen, shall mean any conduct or method of initiation into any student organization, whether on public or private property, which willfully or recklessly endangers the physical or mental health of any student or other person. Such conduct shall include whipping, beating, branding, forced calisthenics, exposure to the weather, forced consumption of any food, liquor, beverage, drug or other substance, or any other brutal treatment or forced physical activity which is likely to adversely affect the physical health or safety of any such student or other person, or which subjects such student or other person to extreme mental stress, including extended deprivation of sleep or rest or extended isolation.

Notwithstanding any other provisions of this section to the contrary, consent shall not be available as a defense to any prosecution under this action.

Section 18. Whoever knows that another person is the victim of hazing as defined in section seventeen and is at the scene of such crime shall, to the extent that such person can do so without danger or peril to himself or others, report such crime to an appropriate law enforcement official as soon as reasonably practicable. Whoever fails to report such crime shall be punished by a fine of not more than one thousand dollars.

Section 19. Each institution of secondary education and each public and private institution of post-secondary education shall issue to every student group, student team or student organization which is part of such institution or is recognized by the institution or permitted by the institution to use its name or facilities or is known by the institution to exist as an unaffiliated student group, student team or student organization, a copy of this section and sections seventeen and eighteen; provided, however, that an institution’s compliance with this section’s requirements that an institution issue copies of this section and sections seventeen and eighteen to unaffiliated student groups, teams or organizations shall not constitute evidence of the institution’s recognition or endorsement of said unaffiliated student groups, teams or organizations.

Each such group, team or organization shall distribute a copy of this section and sections seventeen and eighteen to each of its members, plebes, pledges or applicants for membership. It shall be the duty of each
such group, team or organization, acting through its designated officer, to deliver annually, to the
institution an attested acknowledgement stating that such group, team or organization has received a copy
of this section and said sections seventeen and eighteen, that each of its members, plebes, pledges, or
applicants has received a copy of sections seventeen and eighteen, and that such group, team or
organization understands and agrees to comply with the provisions of this section and sections seventeen
and eighteen.

Each institution of secondary education and each public or private institution of post-secondary education
shall, at least annually, before or at the start of enrollment, deliver to each person who enrolls as a full
time student in such institution a copy of this section and sections seventeen and eighteen.

Each institution of secondary education and each public or private institution of post-secondary education
shall file, at least annually, a report with the board of higher education and in the case of secondary
institutions, the board of education, certifying that such institution has complied with its responsibility to
inform student groups, teams or organizations and to notify each full time student enrolled by it of the
provisions of this section and sections seventeen and eighteen and also certifying that said institution has
adopted a disciplinary policy with regard to the organizers and participants of hazing, and that such policy
has been set forth with appropriate emphasis in the student handbook or similar means of communicating
the institution’s policies to its students. The board of higher education and, in the case of secondary
institutions, the board of education shall promulgate regulations governing the content and frequency of
such reports, and shall forthwith report to the attorney general any such institution which fails to make
such report.

Massachusetts General Laws, c. 269 § 17, 18 and 19.

4.17 Financial Aid Fraud

Students who are deliberately deceptive in their financial aid applications are subject to disciplinary
action. If you purposely give false information in the aid application process and receive aid from federal
programs, you may be subject to fine, or imprisonment, or both.

If, after reviewing an application for financial aid, the School has reason to suspect that an aid applicant
may have deliberately misrepresented information resulting in fraud or other criminal misconduct in
connection with the aid application, disciplinary action may be taken. Referral in such cases for applicants
receiving federal aid may be made to the US Department of Education's Office of Inspector General, or, if
more appropriate, to a state or local authority. If evidence of fraud or criminal misconduct is documented,
the School will review the matter to determine if the student should be sanctioned or dismissed.

4.18 Patient Confidentiality and HIPAA

In cases where a Master’s student is involved in activities involving patients as part of her/his program of
study, the student must abide by the HMS Policy on Patient Confidentiality and the Health Insurance
Portability and Accountability Act (“HIPAA”) in addition to any patient confidentiality policies at the
clinical site. Some Master’s students may also be employees or affiliates of a clinical institution or
organization, and will also be subject to all relevant policies of that institution or organization.
When concern that a student has violated the confidentiality of a patient arises, the Medical School will initiate a fair process to determine the validity of the concern. (Master’s students who are also clinicians at the institution at which the violation occurred will also be subject to the rules and processes of that institution, though HMS may impose separate consequences.) Students, faculty and administrators are expected to act in good faith while carrying out this process. The Medical School will convene a committee, composed of three student representatives and three faculty members, to evaluate the concern. The faculty members appointed to the committee should have no evaluative responsibility for the student, should not be administrators of a program in which the student participates, and should not be the faculty members who initially raised the concern. The members of the committee, as well as any community members who were involved in alerting the Medical School to the potential violation, should maintain the confidentiality of the committee’s proceedings, including the confidentiality of the student. The committee will make its decisions by majority vote.

The committee first will determine if patient confidentiality has been violated, consulting as necessary with representatives from the clinical site. If patient confidentiality has been violated, the committee then will determine the circumstances of the violation, including, for example, whether or not the student believed he or she was acting in good faith. In making this determination, the committee will take into account that the student's understanding of patient confidentiality may be limited by his or her level of training on the topic. If the committee concludes that the student acted in good faith, then the committee will discuss the matter with the student, help the student learn from the experience, and find an appropriate resolution. The focus of this process is on creating an educational, rather than a disciplinary, experience for the student. If the committee concludes that the student acted in bad faith, then the committee ordinarily will discuss the matter with the student and the student’s Program Director or research mentor. In this case, the committee may consider referring the case to the Academic Progress and Review Board for the Master’s Programs (APRB) for further evaluation and/or disciplinary action.

All students must follow HIPAA rules when participating in clinical or clinically-related activities at U.S.-based clinical sites and any local policies or laws in non-U.S.-based clinical sites. HIPAA compliance includes maintaining confidentiality of paper and electronic health records. When violations of HIPAA by a student are identified by a hospital, clinic, physician’s office, etc., the violation will be reviewed by the APRB, which will recommend remediation and and/or sanctions, including the possibility of required withdrawal or expulsion.

4.19 Harvard University Sexual and Gender-Based Harassment Policy

Policy Statement

Harvard University is committed to maintaining a safe and healthy educational and work environment in which no member of the University community is, on the basis of sex, sexual orientation, or gender identity, excluded from participation in, denied the benefits of, or subjected to discrimination in any University program or activity. Gender-based and sexual harassment, including sexual violence, are forms of sex discrimination in that they deny or limit an individual’s ability to participate in or benefit from University programs or activities.

This Policy is designed to ensure a safe and non-discriminatory educational and work environment and to meet legal requirements, including: Title IX of the Education Amendments of 1972, which prohibits...
discrimination on the basis of sex in the University’s programs or activities; relevant sections of the Violence Against Women Reauthorization Act; Title VII of the Civil Rights Act of 1964, which prohibits discrimination on the basis of sex in employment; and Massachusetts laws that prohibit discrimination on the basis of sex, sexual orientation, and gender identity. It does not preclude application or enforcement of other University or School policies.

It is the policy of the University to provide educational, preventative and training programs regarding sexual or gender-based harassment; to encourage reporting of incidents; to prevent incidents of sexual and gender-based harassment from denying or limiting an individual’s ability to participate in or benefit from the University’s programs; to make available timely services for those who have been affected by discrimination; and to provide prompt and equitable methods of investigation and resolution to stop discrimination, remedy any harm, and prevent its recurrence. Violations of this Policy may result in the imposition of sanctions up to, and including, termination, dismissal, or expulsion, as determined by the appropriate officials at the School or unit.

Retaliation against an individual for raising an allegation of sexual or gender-based harassment, for cooperating in an investigation of such a complaint, or for opposing discriminatory practices is prohibited. Submitting a complaint that is not in good faith or providing false or misleading information in any investigation of complaints is also prohibited.

Nothing in this Policy shall be construed to abridge academic freedom and inquiry, principles of free speech, or the University’s educational mission.

For the full policy, click here.

5. Dual degree Programs

5.01 MD-MMSc or MD-Master of Discipline Programs

In certain programs, HMS medical students are permitted to pursue a master’s degree as part of a five-year combined MD-Master’s Degree program. See Section 2.06 for a description of full-time status during the Master’s year. Other descriptions and requirements may be found in the HMS Medical School handbook.

Tuition, Fees, and Financial Aid

During the years in which the student is enrolled in the MD program, all policies related to tuition, fees, and financial aid for medical students will apply. During the year in which the student is enrolled in the Master’s program, the Master’s tuition and fees policy will apply and financial aid, if any, will be determined based upon the student’s financial aid profile in the medical student program. Prospective students should discuss any questions with the Master’s program and the HMS Office for Financial Aid. More information is available in the Medical Student handbook in Section 5.04.
6. Financial Obligations

6.01 Tuition, Fees, and Living Expenses

Harvard Medical School (FY16) 2015-2016 Cost of Attendance Budgets:
- MMSc Student Cost of Attendance
- MMSc – Global Health Delivery Travel Expenses for On-Site Project
- Master of Bioethics Student Cost of Attendance

Harvard Medical School (FY17) 2016-2017 Cost of Attendance Budgets:
- Master’s Student Cost of Attendance – Year 1
- Master’s Student Cost of Attendance – Year 2
- MMSc – Global Health Delivery Travel Expenses for On-Site Project

6.02 Tuition Requirements for Master’s Degree Candidates

Harvard Medical School tuition rates are set annually and cover courses taken from July 1 through June 30 each year up to the final year of enrollment, ending with graduation, which occurs prior to June 30th. Tuition is billed by term. For students enrolled on a full-time basis, four terms of tuition at 80% of the MMSc rate are required for the MMSc program; two terms of tuition at the full MMSc rate are required for the MMSc year of the dual-degree MD-MMSc program; and two terms of tuition at the full Master of Discipline rate are required for the Master of Discipline program.

Some programs offer formal part-time options. If a student enrolls in a formal part-time program, tuition will be prorated based on the number of terms in the formal part-time option.

Note that the tuition rate is subject to change each year and proration will be based upon the rate in effect during the year of enrollment.

Tuition for Additional Time

Students who require additional time to complete degree requirements may be charged an additional tuition fee for each additional term at 50% of the tuition rate, prorated for part-time enrollment. Additional tuition fees will be assessed for students not completing their degree requirements prior to September 1 following the expected May graduation. Note that registration and health fees will also be charged for students enrolled for additional terms.

Impact of Approved Leaves of Absence

If a student takes a leave of absence for personal or medical reasons during the course of a term, the appropriate amount of tuition will be charged according to the Tuition and Fee Adjustment Calendar (Section 6.03).
6.03 Students Withdrawing Mid-Term

Registered students who withdraw formally or are withdrawn, or who take a Leave of Absence from the Medical School after the dates listed below are ordinarily charged tuition according to the following Tuition and Fee Adjustment Calendar:

**Fall (on or before):**

- September 15: one-fourth tuition for the term
- October 15: one-half
- November 15: three-fourths
- after November 15: full tuition

**Spring (on or before):**

- February 15: one-fourth tuition for the term
- March 15: one-half
- April 15: three-fourths
- after April 15: full tuition

**Appeals**

An administrative committee will be convened to answer written appeals to this policy.

**Refund Policy**

If a student who is receiving any form of financial aid withdraws and is entitled to a refund, a portion of that refund may be returned. If the student’s award package included any federal funds other than Federal Work-Study and the withdrawal occurs in the first 60% of the term, federal regulations require that a portion of the student’s federal aid be returned to the aid programs. For more information, please review the Refund Policy in the HMS Financial Aid Guidebook, available in the Publications section of the HMS Financial Aid Office website.

6.04 Health Insurance/Fees

Two health insurance fees may be charged to all Master’s students. The Harvard University Student Health Program (HUSHP) Student Health Fee is a required fee and covers most outpatient care at Harvard University Health Services. This requirement is a result of a Harvard Corporation vote and a
Massachusetts state mandate. Please visit, [http://hushp.harvard.edu/student-health-fee](http://hushp.harvard.edu/student-health-fee) for the most up to date information on student health fees.

Harvard University Student Health Insurance Plan (Blue Cross Blue Shield) covers hospital and emergency room visits. This fee and the insurance coverage may be waived. In order to have the Harvard University Student Health Insurance Plan charge waived, students must verify that they are covered by equivalent medical insurance.

Two opportunities exist to waive the Student Health Insurance Plan. A student may file a waiver for the entire academic year or for only the fall or spring term. Financial aid recipients who chose to waive the Student Health Insurance Plan will have this budget item removed from their cost of attendance budget. This removal may result in an adjustment to the financial aid package. Please be aware that the Student Health Insurance Plan charge will appear on the term bill until the waiver has been processed fully. Waivers are available online at [www.hushp.harvard.edu/](http://www.hushp.harvard.edu/). For details and waiver deadlines, students should consult the Member Services office at Harvard University Health Services, Smith Campus Center, first floor, 617-495-2008.

The charge for Harvard-sponsored Blue Cross Blue Shield coverage is included on the term bill in two installments.

For students who have Harvard-sponsored Blue Cross Blue Shield and/or the Student Health Fee coverage in the spring term and receive terminal degrees in May, the Harvard-sponsored Blue Cross Blue Shield and the Student Health Fee coverage extends through July 31. Additional information regarding health insurance coverage is available at [www.hushp.harvard.edu/](http://www.hushp.harvard.edu/).

Students interested in enrolling dependents in HUSHP should contact the Member Services Office for enrollment details. The cost to add dependents is available online at [www.hushp.harvard.edu/](http://www.hushp.harvard.edu/).

Foreign students are not eligible to waive the Student Health Insurance plan with international insurance. Students with J-1 visas are required to purchase coverage for their families as well, and foreign students with other visas are strongly recommended to do so.

Fees for the current academic year may be found at [http://hushp.harvard.edu/rates-plan-dates](http://hushp.harvard.edu/rates-plan-dates).

### 6.05 Payment of University Obligations

Term bills are assessed semiannually; please refer to [http://termbill.harvard.edu/](http://termbill.harvard.edu/) for additional information and the billing calendar.

**Registration:** No enrolled Harvard Medical School Master’s student will be permitted to register for an upcoming term until all tuition, fees, and other charges due from a prior term are paid in full. This policy applies to students who are expecting to enroll in another degree program as well.
Students whose accounts have not been paid in full by the specified deadlines may jeopardize their registration status; in addition, late fees may be assessed on outstanding term bill balances per term as follows:

<table>
<thead>
<tr>
<th>Balance</th>
<th>Late Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>less than $500</td>
<td>$  50.00</td>
</tr>
<tr>
<td>$500 - $1,000</td>
<td>$  75.00</td>
</tr>
<tr>
<td>$1,001 - $5,000</td>
<td>$125.00</td>
</tr>
<tr>
<td>$5,001 - $10,000</td>
<td>$250.00</td>
</tr>
<tr>
<td>over $10,000</td>
<td>$500.00</td>
</tr>
</tbody>
</table>

At least once per term, the Registrar notifies students whose accounts are in arrears.

HMS may, in its sole discretion, make exceptions to this policy in extenuating circumstances. Students should discuss such circumstances with their Program Directors who may consult with the Office for Graduate Education. The decision of the Medical School as to whether to grant an exception shall be final.

**Graduation:** Students should be aware that the degree may not be conferred upon students whose term bill charges from the University, including late fees, are not paid in full prior to the final voting of the degree. When a balance remains but the degree has been voted, the School will withhold the diploma until the term bill account is paid in full.

For students or former students who have an outstanding debt to the University, the School may withhold any or all services until the debt is paid in full.

**6.06 Dishonored Checks**

The University has instructed its bank to redeposit any returned checks received for payment of students’ bills. There is a $50 charge assessed for the first dishonored check and $75 for the second and subsequent checks. If your account indicates a history of dishonored checks, the University may also require that future payments be made in cash or with a certified or bank check.

**6.07 Financial Aid**

The goal of the HMS financial aid program is to assist eligible students and their families in managing a financial plan for obtaining an HMS degree.

HMS Master’s students are eligible to receive financial assistance from certain government programs. In addition, each program may have resources available for both need and merit awards. Students are
encouraged to review the [HMS Financial Aid Guidebook](#) for information regarding the financial aid process at HMS.

Student financial aid packages are constructed based on funds available at the time the application is completed. To apply for financial aid, HMS students file the HMS Application for Financial Aid and the [Free Application for Federal Student Aid (FAFSA)](#). Master’s students are not eligible for need-based HMS institutional funding except to the extent that the student’s program has program-based funds available for scholarships.

The Financial Aid Office maintains a small library of outside scholarship directories as well as a bulletin board listing of part-time employment opportunities. The Office also prepares a number of materials that describe financial aid programs, policies, and procedures. Applicants are welcome to stop by the office in Gordon Hall (Room 211) to have any general questions answered. Additional information is available on the [HMS Financial Aid Office website](#).

**Deadlines for Financial Aid Application**

The financial aid deadline for all Master’s students is May 1st. Award decisions for on-time, completed applications are processed and mailed out by May 31st. Timely submission of all application materials is essential, as financial aid decisions are based upon financial need and availability of funds; late applicants could jeopardize their access to limited sources of aid.

Please refer to the [HMS Financial Aid Guidebook](#) for more information on the financial aid application process.

**Sources of Financial Aid for Master’s Students**

*Program-Based Funds* - Individual Master’s programs may have their own program-based resources from research and training grants and institutional and philanthropic resources. Certain types of funds are restricted in terms of use and may not be available to all students. Programs review their resources and assign funding based on both need and merit.

*Federal Loan Funds* – Master’s students may apply for federal loans through the HMS Office of Financial Aid.

**Financial Aid for Students Enrolled in a Dual Degree MD-Master’s Program**

Medical students taking a fifth year to complete an HMS Master’s degree are eligible to apply for financial aid during all five years. Living expenses mirror the fourth-year budget. Students are required to speak with their financial aid officer to discuss how taking a fifth year will impact their specific financial aid package and overall debt.

Students who choose the 5-year dual degree program are charged medical student tuition for the years enrolled in the MD program and Master’s tuition for the year enrolled in the Master’s program.
Financial Aid When on a Leave of Absence (LOA)

If a student takes a leave of absence after the term has begun, tuition and living expenses may be prorated based upon when the student ceases enrollment at HMS. The Financial Aid Office will revise the standard budget to reflect adjustments to tuition and living expenses as well as prorations to other costs, and will calculate an adjusted award. Students must contact the Financial Aid Office to set up a mandatory loan exit interview counseling session. For more information on how a leave of absence impacts a student’s financial aid package, please see the HMS Financial Aid Guidebook.

Loan Forgiveness Programs

HMS does not provide loan forgiveness programs for Master’s students.

7. General Policies

7.01 Harvard University Policy Regarding Religious Holidays

In accordance with Massachusetts State law, any student in an educational institution who is unable, because of his or her religious beliefs, to attend classes or to participate in any examination, study, or work requirement on a particular day shall be excused from any such examination, study, or work requirement. The student shall be provided with an opportunity to make up such examination, study or work requirement, which he or she may have missed because of such absence on any particular day, provided that such makeup examination or work does not create an unreasonable burden upon the School. No fees of any kind shall be charged by the institution for making available to the said student such opportunity. No adverse or prejudicial effects shall result to any student because of his/her availing himself or herself of the provisions of this section.

7.02 Vacations and Holidays

Vacations

Vacation or recess periods are built into the school year. All students have a recess at the end of December (includes Christmas Day and New Year’s Day), which is determined annually by the academic schedule. Other breaks are as follows:

- A one-week break during the January – June term and a summer break from June to August unless a program requires a summer session.
- Approximately 3 weeks in January unless a program requires a January-term course

Please refer to the calendar in Section 2.01 for specific dates.

Holidays

Classes are not scheduled on the following Harvard-observed holidays:
• Labor Day
• Columbus Day
• Veteran’s Day
• Thanksgiving and the following Friday (classes end at 12:30 on the Wednesday before Thanksgiving)
• Christmas Day (included in the holiday recess period)
• New Year’s Day (included in the holiday recess period)
• Martin Luther King Day
• Presidents’ Day
• Memorial Day

7.03 Transportation Policy

Harvard Medical School recognizes that Master’s students may need educational experiences beyond those available on the Longwood campus and in our neighboring affiliated teaching hospitals. For some programs this includes activities around the globe.

Financial Responsibility for Transportation: Harvard Medical School policy is that students are responsible for arranging their own transportation, including that to and from their research sites. The HMS-affiliated hospitals, with some exceptions, are accessible by public transportation from the Medical School and shuttle services between hospitals.

Students who choose to take cars to their sites are responsible for covering all gas, parking fees and other expenses incurred by this mode of travel.

Certain Master’s programs with unique training requirements in distant locations may have limited resources for travel/transportation costs.

Cases of Financial Hardship: Students who are unable to afford the cost of transportation to a research site should consult their Program. Note: the average cost for travel to research sites is included in the standard student budget used to assess financial need; in some cases, additional travel costs are included.

LMA Harvard Medical School Shuttle (M2): MASCO manages the Harvard Medical School shuttle, which runs between the Longwood Medical Area (LMA) and Harvard University in Cambridge. This service is free to all students, faculty, and staff; you must show your Harvard ID card to access this service. For others, tickets for the Harvard M2 shuttle can be bought at the HMS Parking Office or at the cashier’s office at Richard A. and Susan F. Smith Campus Center in Cambridge. The M2 schedule is available at the parking office, the Information Office at Smith Campus Center Arcade, the security desk at Vanderbilt Hall, and online. Please go to http://www.masco.org for more information.

Zip Car: Harvard Medical School has a limited number of hybrid Zipcars available in the Palace Parking lot between 180 and 164 Longwood Avenue. Harvard faculty, staff, students, post-docs and others working in the Longwood area are eligible to receive a discount on Zipcar memberships by signing up at http://www.green.harvard.edu/zipcars-harvard-medical-school.
**MBTA**: The Massachusetts Bay Transportation Authority (MBTA) is the public transit system for Greater Boston. For information go to the MBTA website at [http://www.mbta.com](http://www.mbta.com).

For more information and a Transportation Guide, go to [http://mycourses.med.harvard.edu/ResCourses/CampusWide/HMSTG/hmstg.htm](http://mycourses.med.harvard.edu/ResCourses/CampusWide/HMSTG/hmstg.htm). See also Section 10.12.

### 7.04 Weather and Emergency Policy

**Emergency Notification System**

All students are required to sign up to receive emergency notifications from Harvard University’s Community Emergency Notification System called MessageMe, which allows the University to quickly distribute critical information to you, wherever you are located, during an emergency.

MessageMe helps you stay informed in the event of an emergency by sending alerts to your personal electronic device (cell phone, PDA, smartphone, etc.) through text messaging, voicemail, and/or e-mail.

Students can sign up for the Emergency Notification Service by going to [https://messageme.harvard.edu/](https://messageme.harvard.edu/) or through MyCourses ([http://mycourses.med.harvard.edu/](http://mycourses.med.harvard.edu/)). Instructions for MyCourses are as follows: Click on My Account in the upper right corner of the page, click on Email Settings. Click on the button, Register/Update MessageMe under the MessageMe Preferences panel and follow the directions to register for this service.

**Weather Emergencies**

During a weather emergency or other emergency, all members of the HMS community may call 617-432-6666 to hear the latest information on the status of the School via a listen-only voice mail box.

The Medical School's general position regarding inclement weather is that, short of a declared State of Emergency (see below), the School remains open. The teaching and research activities of HMS continue despite inclement weather. In such weather emergencies, however, the Deans for Medical and Graduate Education may decide to cancel classes. Unless a message to the contrary is communicated through one of the means outlined below, you should assume that classes are held as scheduled; however, use your discretion regarding travel safety.

If a decision is made to cancel classes, a message will be communicated via phone, internet, and television:

- **HMS Phone**: 617-432-6666 (listen-only voice mail box);
- **HMS Internet**: [http://hms.harvard.edu/](http://hms.harvard.edu/) and Intranet: MyCourses and eCommons. A "no classes" announcement on these sites will refer to all MD classes on the HMS Quad;
- **Local television channels** 4 (CBS), 5 (ABC) and 7 (NBC) and their corresponding websites.

Even in lesser storms, some faculty tutors, lecturers, or lab instructors may not be able to make it in from distant suburbs. Programs will be notified of a faculty absence.
If the emergency situation is inclement weather, all students at course sites are responsible for contacting and following the reporting instructions of their site or Program Director. Students must use their own discretion regarding the safety of travel to their course location.

When a State of Emergency is declared by the Governor or other local governing official, school personnel are expected to abide by those directives, and no classes will take place.

7.05 Program Evaluation

External Review

In order to maintain and strengthen its position as a leader and innovator in medical and graduate biomedical education, Harvard Medical School is engaged in ongoing efforts to monitor, evaluate, and improve the Master’s curricula and their impact on students. We want to ensure that specific curricular objectives are met and outcomes related to our education mission are achieved; that educational resources are allocated to maximize the educational experiences of HMS students; and that HMS students receive professional training that prepares them for leadership in their respective fields.

On a periodic basis, each Master’s program at Harvard Medical School undergoes a formal review by an external review committee consisting of at least three reviewers approved by the Dean for Basic Science and Graduate Education. The purpose of the review is to identify the importance and value of the program and to obtain constructive feedback on the program. All aspects of the review process are managed by the Office of the Dean for Basic Science and Graduate Education.

Student Evaluation of Courses

All students are expected to complete evaluations for each of the courses they complete, dependent upon the requirements of each program and those courses taken in other schools. See Section 3.08 for additional information regarding unprofessional comments in course surveys.

7.06 Student Identification Cards

Identification (ID) cards are the property of Harvard University and are intended for University purposes only. ID cards are required for admission to most Harvard activities and facilities, including libraries, museums, dining halls, athletic buildings, and student residences. Some facilities may also require a sticker for entry. The front of the card and the magnetic strips on the back, however, must be kept free from stickers.

ID cards are not transferable; a student may not allow any other person to use his or her card for any purpose. Every student is responsible for his or her ID and the consequences of its misuse. A student who alters or falsifies his or her University identification card or produces or distributes false IDs of any kind is subject to disciplinary action. Students must show their identification cards or otherwise identify themselves upon request to any properly identified officer of the University.
Lost cards should be reported immediately to the Longwood ID office (677 Huntington Ave). There is a charge of $25.00 for a lost student photo ID. HUID will waive any replacement charge for a stolen ID card if the student presents us with a copy of a police report that lists the ID card as one of the stolen items. Otherwise the same charges apply as for lost cards. Students may submit a police report for a term bill credit within 30 days. For more information, go to http://www.campusservicecenter.harvard.edu/.

7.07 Computers, Networks and Technology Requirements

Students who are provided access to Medical School computer facilities and to the campus-wide communication network assume responsibility for their appropriate use. The Medical School expects students to be careful, honest, responsible, and civil in the use of computers and networks. Those who use wide-area networks (such as the Internet) to communicate with individuals or to connect to computers at other institutions are expected to abide by the rules for the remote systems and networks as well as those for Harvard’s systems. Be advised that, in addition to being a violation of School rules, certain computer misconduct is prohibited under Massachusetts General Laws, c.266 subsection 33 (a) and 12 (f) and is, therefore, subject to criminal penalties. Such misconduct includes knowingly gaining unauthorized access to a computer system or database, falsely obtaining electronic services or data without payment of required charges, and destroying of electronically processed, stored, or in-transit data. In addition, students may be held responsible for misuse that occurs by allowing access to a third party to their own computer or account. (See also Section 3.10, Education Computing and MyCourses.)

Use of Facilities

Computer and network facilities are provided to students primarily for their educational use. These facilities have tangible value. Consequently, attempts to circumvent accounting systems or to use the computer accounts of others will be treated as forms of attempted theft.

Students may not attempt to damage or to degrade the performance of Medical School computers and networks and should not disrupt the work of other users. Students may not attempt to circumvent security systems or to exploit or probe for security holes in any Harvard network or system, nor may students attempt any such activity against other systems accessed through Harvard’s facilities. Execution or compilation of programs designed to breach system security is prohibited unless authorized in advance. Students assume personal responsibility for the use of their accounts. Consequently, students may not disclose their passwords or otherwise make Harvard’s facilities available to unauthorized persons (including family or friends). Moreover, the possession or collection of others’ passwords, personal identification numbers (PINs), private digital certificates, or other secure identification information is prohibited. Use of Harvard’s computers and networks for non-school-related purposes without authorization is prohibited.

Mobile Device Requirement

Master’s students are expected to have a “smart mobile” device or a laptop computer.

The operating system of the mobile device must be Android 2.3 (or higher) or Apple iOS 4.1 (or higher). The device must be WiFi capable. Students may choose their own devices (tablets or smartphones), e.g., iPad, Galaxy Tab, iPhone, Droid Razr Maxx, iPod Touch 4th gen.
Each device must adhere to the security standards put forth by the [HMS Office for Information Technology](http://www.hms.harvard.edu/it).  

**Financial concerns related to this requirement:** The other costs portion of the student cost of attendance budget is sufficient to cover any additional charges incurred by this expense. Budget adjustment requests to increase financial aid for this purpose will not be approved.

**Student Computing Ethics**

As in all other areas of your academic life, the use of computing technology should be undertaken in a manner consistent with the high standards of professional conduct. In addition, the internet and electronic mail may create additional challenges to students’ responsibility for ensuring confidentiality, especially patient confidentiality. To protect this fundamental patient right, you should not use this medium to transmit information containing: (1) patient names or other medical records data that may be used to identify individual patients; or (2) names and/or other data that may be used to identify individual human subjects research participants. When you are involved in research at a clinical site, your strict compliance with patient confidentiality rules and regulations is expected, and lapses are subject to disciplinary procedures.

**Emergency Notification System**

All students are required to sign up to receive emergency notifications from Harvard University’s Community Emergency Notification System called *MessageMe*, which allows the University to quickly distribute critical information to you, wherever you are located, during an emergency.

*MessageMe* helps you to stay informed in the event of an emergency by sending alerts to your personal electronic device (cell phone, pda, smartphone, etc.) through text messaging, voice, and/or e-mail.

Students can sign up for the Emergency Notification Service by going to [https://messageme.harvard.edu/](https://messageme.harvard.edu/) or through MyCourses ([http://mycourses.med.harvard.edu/](http://mycourses.med.harvard.edu/)). Instructions for MyCourses are as follows: Click on *My Account* in the upper right corner of the page, click on *Email Settings*. Click on the button, *Register/Update MessageMe* under the *MessageMe Preferences* panel and follow the directions to register for this service.

Additional information regarding information technology at HMS is available at [HMS Office for Information Technology](http://www.hms.harvard.edu/it).

**7.08 Student E-mail Accounts**

Every HMS student is provided an official HMS e-mail account. Because the Medical School and other offices at Harvard send official information and notifications to this designated account, students are responsible for regularly monitoring their Harvard e-mail account for important communications. Students should also be aware that e-mail is NOT a highly secure form of communication and should never be used to store or transmit high risk confidential information such as patient information, social security numbers, or any confidential information that you do not want to be public.
7.09 Electronic Communication and Social Media

Electronic Communication

Harvard neither sanctions nor censors individual expression of opinion on its systems. The same standards of behavior, however, are expected in the use of electronic mail as in the use of telephones and written and oral communication. Therefore, electronic mail, like telephone messages, must be neither obscene nor harassing. Similarly, messages must not misrepresent the identity of the sender and should not be sent as chain letters or be broadcast indiscriminately to large numbers of recipients. This prohibition includes unauthorized mass electronic mailings. For example, e-mail on a given topic that is sent to large numbers of recipients should in general be directed only to those who have indicated a willingness to receive such e-mail.

Social Media

Caution is recommended as well in using social media sites such as Facebook or Twitter. HMS is committed to the highest standards of conduct. In admitting a student to HMS, we believe you have already demonstrated that your behavior in person – both on campus and off – and in your electronic presence reflects the maturity and civility that are the necessary underpinnings of any profession. After you are admitted, enrollment remains contingent on a continuation of this high standard of conduct. Items that represent unprofessional behavior that are posted by you on social networking sites reflect poorly on you and on your profession. Such items may become public and could subject you to unintended exposure and consequences. Harvard University’s social media guidelines can be found here. When students are in the hospital or other clinical settings, they must adhere to each clinical institution’s privacy and social media policies (e.g., see MGH social media policy http://www.massgeneral.org/notices/socialmediapolicy.aspx).

7.10 Privacy of Information

Information stored on a computer system or sent electronically over a network is the property of the person who created it. Examination, collection, or dissemination of that information without authorization from the owner is a violation of the owner’s rights to control his or her own property. Systems administrators, however, may gain access to user’s data or programs when maintaining or preventing damage to systems or ensuring compliance with other University rules is necessary.

Computer systems and networks provide mechanisms for the protection of private information from examination by unauthorized persons. These mechanisms are necessarily imperfect, and any attempt to circumvent them or to gain unauthorized access to private information (including both stored computer files and messages transmitted over a network) will be treated as a violation of privacy and will be cause for disciplinary action.

In general, information that the owner would reasonably regard as private must be treated as private by other users. Examples include the contents of electronic mail boxes, the private file storage areas of individual users, and information stored in other areas that are not public. That measures have not been taken to protect such information does not make inspection of such information by others permissible.
On shared and networked computer systems, certain information about users and their activities is visible to others. Users are cautioned that certain accounting and directory information (for example, user names and electronic mail addresses), certain records of file names and executed commands, and information stored in public areas are not private. Nonetheless, such unsecured information about other users must not be manipulated in ways that the rightful user might reasonably find intrusive; for example, eavesdropping by computer and systematic monitoring of the behavior of others are likely to be considered invasions of privacy that would be cause for disciplinary action. The compilation or redistribution of information from University directories (printed or electronic) to third parties, especially those outside the University, is forbidden. To learn more about policies and procedures regarding information security and privacy at Harvard, please refer to http://www.security.harvard.edu/.

7.11 Security Checks

HMS will conduct security checks on all Master's applicants.

In the event that a security record is returned on an HMS student, HMS will need to contact each affiliate where that student will be involved with patients and advise each affiliate that it needs to conduct its own security or Criminal Offender Record Information check on that student.

Other security checks will be performed for international students who must also meet all the requirements for an appropriate student visa.

7.12 Sign and Banner Posting

Bulletin boards are provided in various buildings, but may not necessarily be used by Master’s students for posting signs and fliers. Permission to post must be obtained from the department or program owner of the bulletin board. Postings on painted or glass surfaces will be removed. All fliers and notices should be put on bulletin boards and must pertain to student activities or interests. Students who wish to post larger easel-sized posters or fliers, etc., in other HMS buildings should have their poster/flier reviewed and approved by their Program Director prior to posting. All postings must be appropriate and related to school activities.

7.13 Firearms, Explosives, Combustible Fuels, Fireworks, and Dangerous Weapons

Possession and/or use on University property of firearms or ammunition, explosives, combustible fuels, firecrackers, and potential ingredients thereof are forbidden. Please take careful note of the following statute of the Commonwealth of Massachusetts:

Whoever, not being a law enforcement officer, and notwithstanding any license obtained by him under the provisions of chapter one hundred and forty, carries on his person a firearm as hereinafter defined, loaded or unloaded, or other dangerous weapon in any building or on the grounds of any elementary or secondary school, college or university without the written authorization of the board or officer in charge of such elementary or secondary school, college or university shall be punished by a fine of not more than one thousand dollars or by imprisonment for not more than one year or both. For the purpose of this paragraph “firearm” shall mean any pistol, revolver, rifle or smoothbore arm from which a shot, bullet or pellet can be discharged by whatever means.
Any officer in charge of an elementary or secondary school, college or university or any faculty member or administrative officer of an elementary or secondary school, college or university failing to report violations of this paragraph shall be guilty of a misdemeanor and punished by a fine of not more than five hundred dollars. [Massachusetts General Laws, c.269 §10(j)]

In addition, Massachusetts law requires a permit or firearms identification card or compliance with other specialized rules (depending upon the type of weapon) for possession of any firearms. The definition of firearms is a broad one and includes pistols or guns operated by air, carbon dioxide, or other gases. Carrying any firearm (even if unloaded) in violation of the law is punishable by imprisonment with a mandatory minimum sentence of one year, which cannot be suspended or reduced. Students should consult the Boston Police if they intend to possess firearms on non-University property, in order to assure strict compliance with the applicable statutes.

According to Massachusetts law, the following are examples of dangerous weapons: “any stiletto, dagger or a device or case which enables a knife with a locking blade to be drawn at a locked position, any ballistic knife, or any knife with a detachable blade capable of being propelled by any mechanism, dirk knife, any knife having a double-edged blade, or a switch knife, or any knife having an automatic spring release device by which the blade is released from the handle, having a blade of over one and one-half inches, or a slung shot, blowgun, blackjack, metallic knuckles or knuckles of any substance which could be put to the same use with the same or similar effect as metallic knuckles, nunchaku, zoobow, also known as klackers or kung fu sticks, or any similar weapon consisting of two sticks of wood, plastic or metal connected at one end by a length of rope, chain, wire or leather, a shuriken or any similar pointed starlike object intended to injure a person when thrown, or any armbrand, made with leather which has metallic spikes, points or studs or any similar device made from any other substance or a cestus or similar material weighted with metal or other substance and worn on the hand, or a manrikigusari or similar length of chain having weighted ends.” Massachusetts General Laws c.269 §10(b).

7.14 Obscene or Harassing Telephone Calls

The placement of an obscene or harassing telephone call, which is a criminal offense, punishable to the full extent of the law in the courts, is treated as a serious disciplinary issue within the Medical School.

Information from the Harvard Police is available for anyone receiving such a call.

7.15 Patents, Trademarks, and "Use of Name" Regulations

Members of the University, including students, are expected to notify and to disclose to the Office of Technology Development (OTD) any discovery or invention they have made in connection with their University work. Copies of the University policy regarding inventions, patents, and copyrights are available from OTD at http://www.techtransfer.harvard.edu/. When inventions are subject to the University policy, OTD determines whether a patent application should be filed (the cost of which is borne by the University) and undertakes a marketing effort to license the invention to one or more companies for development into commercial products. Net income received from licenses is shared with the inventors.

Use of the names and insignia of the University or any of its units by any student or student group is permitted only as spelled out in the University Policy on the Use of the Harvard Names and Insignias. In particular, reference to “Harvard” or “Harvard University” or suggestions of affiliation with any school or
unit of the University in connection with any organization, publication, activity, or third-party is allowable only with advance permission of the Dean or Provost.

All student group names, logos, or publications incorporating any of the University’s trademarks (e.g., “Harvard Polo Club”) are owned by the President and Fellows of Harvard College and are used by permission of the University.

Harvard University’s Trademark Program, operated out of the Office of Technology Development, is responsible for licensing the use of Harvard’s various trademarks (e.g., “Harvard,” “Harvard College,” “Harvard Medical School,” “the VERITAS shield,” etc.) throughout the world. Revenue from the program is provided to the Faculty of Arts and Sciences (FAS) and is used for undergraduate financial aid. Any student group wishing to reproduce any University trademark on products (e.g., t-shirts, mugs, etc.) must contact the Trademark Program for written approval. The Trademark Program will provide guidance on how the marks may be used, can recommend licensed manufacturers, and will advise when royalty exemptions apply. In addition to licensing, the Trademark Program is responsible for dealing with the unauthorized use of the University’s trademarks by third parties worldwide. Any unauthorized use of the Harvard trademarks should be reported to the Trademark Program. The Trademark Program also provides advice on trademark-related issues and assists departments in obtaining trademark protection for any trademarks they are using, whether or not they include the word “Harvard.”

For questions and/or additional information please contact the Office of Technology Development at 1350 Massachusetts Avenue, Smith Campus Center #727; 617-495-3067; or, at HMS, Gordon Hall, Suite 414; (617) 432-0920; hms_otd@harvard.edu.

7.16 Discrimination, Harassment, and Student Mistreatment

Harvard Medical School (HMS) takes issues of mistreatment seriously and aspires to a culture of zero tolerance for instances of abuse, mistreatment, and disrespect. HMS is committed to maintaining an environment free from discrimination, sexual harassment, unprofessional relationships, and abuses of authority. It is the strong and consistent policy of Harvard Medical School to treat all members of our community with respect, to provide an environment conducive to learning and working, and to ensure equal access to rights, privileges and opportunities without regard to race, color, sex, sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, disability, or any other legally protected category. Discrimination or harassment on the basis of these characteristics is inconsistent with Harvard’s principles and policies. Harvard expects that all those who interact with members of our community will comply with all applicable anti-discrimination laws.

Policies on Discrimination and Harassment

See also the HMS Ombuds website.

Sexual and Gender-Based Harassment
HMS has adopted the University-wide Sexual and Gender-Based Harassment Policy (“University Policy”) and the University’s Procedures for Handling Complaints Involving Students Pursuant to the Sexual and Gender-Based Harassment Policy (“University Procedures”). To the extent any existing HMS policies or procedures interfere with compliance with the University Policy and University Procedures, application of such HMS policies and procedures shall be suspended. The University Policy states as follows:

Policy Statement

Harvard University is committed to maintaining a safe and healthy educational and work environment in which no member of the University community is, on the basis of sex, sexual orientation, or gender identity, excluded from participation in, denied the benefits of, or subjected to discrimination in any University program or activity. Gender-based and sexual harassment, including sexual violence, are forms of sex discrimination in that they deny or limit an individual’s ability to participate in or benefit from University programs or activities.

This Policy is designed to ensure a safe and non-discriminatory educational and work environment and to meet legal requirements, including: Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of sex in the University’s programs or activities; relevant sections of the Violence Against Women Reauthorization Act; Title VII of the Civil Rights Act of 1964, which prohibits discrimination on the basis of sex in employment; and Massachusetts laws that prohibit discrimination on the basis of sex, sexual orientation, and gender identity. It does not preclude application or enforcement of other University or School policies.

It is the policy of the University to provide educational, preventative and training programs regarding sexual or gender-based harassment; to encourage reporting of incidents; to prevent incidents of sexual and gender-based harassment from denying or limiting an individual’s ability to participate in or benefit from the University’s programs; to make available timely services for those who have been affected by discrimination; and to provide prompt and equitable methods of investigation and resolution to stop discrimination, remedy any harm, and prevent its recurrence. Violations of this Policy may result in the imposition of sanctions up to, and including, termination, dismissal, or expulsion, as determined by the appropriate officials at the School or unit.

Retaliation against an individual for raising an allegation of sexual or gender-based harassment, for cooperating in an investigation of such a complaint, or for opposing discriminatory practices is prohibited. Submitting a complaint that is not in good faith or providing false or misleading information in any investigation of complaints is also prohibited.

Nothing in this Policy shall be construed to abridge academic freedom and inquiry, principles of free speech, or the University’s educational mission.

Definitions

Sexual Harassment
Sexual harassment is unwelcome conduct of a sexual nature, including unwelcome sexual advances, requests for sexual favors, and other verbal, nonverbal, graphic, or physical conduct of a sexual nature, when: (1) submission to or rejection of such conduct is made either explicitly or implicitly a condition of an individual’s employment or academic standing or is used as the basis for employment decisions or for academic evaluation, grades, or advancement (quid pro quo); or (2) such conduct is sufficiently severe, persistent, or pervasive that it interferes with or limits a person’s ability to participate in or benefit from the University’s education or work programs or activities (hostile environment).

Quid pro quo sexual harassment can occur whether a person resists and suffers the threatened harm, or the person submits and avoids the threatened harm. Both situations could constitute discrimination on the basis of sex.

A hostile environment can be created by persistent or pervasive conduct or by a single severe episode. The more severe the conduct, the less need there is to show a repetitive series of incidents to prove a hostile environment. Sexual violence, including rape, sexual assault, and domestic and dating violence, is a form of sexual harassment. In addition, the following conduct may violate this Policy:

- Observing, photographing, videotaping, or making other visual or auditory records of sexual activity or nudity, where there is a reasonable expectation of privacy, without the knowledge and consent of all parties
- Sharing visual or auditory records of sexual activity or nudity without the knowledge and consent of all recorded parties and recipient(s)
- Sexual advances, whether or not they involve physical touching
- Commenting about or inappropriately touching an individual’s body
- Requests for sexual favors in exchange for actual or promised job benefits, such as favorable reviews, salary increases, promotions, increased benefits, or continued employment
- Lewd or sexually suggestive comments, jokes, innuendoes, or gestures
- Stalking

Other verbal, nonverbal, graphic, or physical conduct may create a hostile environment if the conduct is sufficiently persistent, pervasive, or severe so as to deny a person equal access to the University’s programs or activities. Whether the conduct creates a hostile environment may depend on a variety of factors, including: the degree to which the conduct affected one or more person’s education or employment; the type, frequency, and duration of the conduct; the relationship between the parties; the number of people involved; and the context in which the conduct occurred.

Unwelcome Conduct

Conduct is unwelcome if a person (1) did not request or invite it and (2) regarded the unrequested or uninvited conduct as undesirable or offensive. That a person welcomes some sexual contact does not necessarily mean that person welcomes other sexual contact. Similarly, that a person willingly participates in conduct on one occasion does not necessarily mean that the same conduct is welcome on a subsequent occasion.

Whether conduct is unwelcome is determined based on the totality of the circumstances, including various objective and subjective factors. The following types of information may be helpful in making that
determination: statements by any witnesses to the alleged incident; information about the relative credibility of the parties and witnesses; the detail and consistency of each person’s account; the absence of corroborating information where it should logically exist; information that the Respondent has been found to have harassed others; information that the Complainant has been found to have made false allegations against others; information about the Complainant’s reaction or behavior after the alleged incident; and information about any actions the parties took immediately following the incident, including reporting the matter to others.

In addition, when a person is so impaired or incapacitated as to be incapable of requesting or inviting the conduct, conduct of a sexual nature is deemed unwelcome, provided that the Respondent knew or reasonably should have known of the person’s impairment or incapacity. The person may be impaired or incapacitated as a result of drugs or alcohol or for some other reason, such as sleep or unconsciousness. A Respondent’s impairment at the time of the incident as a result of drugs or alcohol does not, however, diminish the Respondent’s responsibility for sexual or gender-based harassment under this Policy.

Gender-Based Harassment

Gender-based harassment is verbal, nonverbal, graphic, or physical aggression, intimidation, or hostile conduct based on sex, sex-stereotyping, sexual orientation or gender identity, but not involving conduct of a sexual nature, when such conduct is sufficiently severe, persistent, or pervasive that it interferes with or limits a person’s ability to participate in or benefit from the University’s education or work programs or activities. For example, persistent disparagement of a person based on a perceived lack of stereotypical masculinity or femininity or exclusion from an activity based on sexual orientation or gender identity also may violate this Policy.

Jurisdiction

This Policy applies to sexual or gender-based harassment that is committed by students, faculty, staff, Harvard appointees, or third parties, whenever the misconduct occurs:

1. On Harvard property; or
2. Off Harvard property, if:
   a. the conduct was in connection with a University or University-recognized program or activity; or
   b. the conduct may have the effect of creating a hostile environment for a member of the University community.

Monitoring and Confidentiality

A variety of resources are available at the University and in the area to assist those who have experienced gender-based or sexual harassment, including sexual violence.

Individuals considering making a disclosure to University resources should make sure they have informed expectations concerning privacy and confidentiality. The University is committed to providing all possible assistance in understanding these issues and helping individuals to make an informed decision.
It is important to understand that, while the University will treat information it has received with appropriate sensitivity, University personnel may nonetheless need to share certain information with those at the University responsible for stopping or preventing sexual or gender-based harassment. For example, University officers, other than those who are prohibited from reporting because of a legal confidentiality obligation or prohibition against reporting, must promptly notify the School or unit Title IX Coordinator about possible sexual or gender-based harassment, regardless of whether a complaint is filed. Such reporting is necessary for various reasons, including to ensure that persons possibly subjected to such conduct receive appropriate services and information; that the University can track incidents and identify patterns; and that, where appropriate, the University can take steps to protect the Harvard community. This reporting by University officers will not necessarily result in a complaint; rather, the School or unit Title IX Coordinator, in consultation with the Title IX Officer, will assess the information and determine what action, if any, will be taken. Information will be disclosed in this manner only to those at the University who, in the judgment of the Title IX Officer or School or unit Title IX Coordinator, have a need to know.

Should individuals desire to discuss an incident or other information only with persons who are subject to a legal confidentiality obligation or prohibition against reporting, they should ask University officers for information about such resources, which are available both at the University and elsewhere. University officers are available to discuss these other resources and to assist individuals in making an informed decision.

Violations of other Rules

The University encourages the reporting of all concerns regarding sexual or gender-based harassment. Sometimes individuals are hesitant to report instances of sexual or gender-based harassment because they fear they may be charged with other policy violations, such as underage alcohol consumption. Because the University has a paramount interest in protecting the well-being of its community and remedying sexual or gender-based harassment, other policy violations will be considered, if necessary, separately from allegations under this Policy.

Racial Harassment

Harvard Medical School defines racial harassment as actions on the part of an individual or group that demean or abuse another individual or group because of racial or ethnic background. Such actions may include, but are not restricted to, using racial epithets, making racially derogatory remarks, and using racial stereotypes.

Reporting Allegations of Mistreatment, Discrimination or Harassment

For allegations of sexual and gender-based harassment: HMS students wishing to report a violation of the University Policy should begin in all cases by contacting the Harvard University Office for Sexual and Gender-Based Dispute Resolution (“ODR”) or an HMS Title IX Coordinator. For all cases where the person alleged to have violated the University Policy is a student, ODR has been charged with implementing the University Procedures, which include processes for initial review, investigation, and determination of whether there was a violation of the University Policy. If the person alleged to have violated the University Policy is not a student, ODR will refer the case to the relevant Title IX
Coordinators and other representatives of HMS, as appropriate. A description of the steps that will take place once a complaint is initiated can be found in the University Procedures. Additional information is also available from ODR.

For all other allegations: HMS has adopted two formal reporting mechanisms: 1) through course evaluations; and 2) through direct communication to the Dean for Basic Science and Graduate Education.

Course Evaluations

Students are encouraged to report instances of mistreatment that occur during a course. Reporting these incidents helps the School and its affiliated hospitals sustain an environment of collegiality and mutual support.

In considering potential instances of mistreatment, students should keep in mind that academic activities involve a high level of accountability, and expectations of students are high. Accordingly, part of the academic experience may be uncomfortable—e.g., being “put on the spot” in a class—but does not constitute mistreatment. With this fine distinction in mind (e.g., between appropriate accountability and inappropriate disrespect), students should respond to the questions on the course evaluations using good judgment in reporting and describing all incidents, if applicable.

Direct Reporting of Troubling Incidents

Students who experience a troubling instance (or instances) of mistreatment personally or witness such behavior have the option, and are encouraged, to report such incidents to the immediate attention of the Dean for Basic Science and Graduate Education, who will treat such reports with discretion. Reports of sexual and gender-based harassment should be made to the Harvard University Office for Sexual and Gender-Based Dispute Resolution (“ODR”) or an HMS Title IX Coordinator, as described above.

Procedures for Addressing Complaints of Mistreatment, Discrimination, or Harassment

For allegations of sexual and gender-based harassment: As set forth above, HMS has adopted the University’s Procedures for Handling Complaints Involving Students Pursuant to the Sexual and Gender-Based Harassment Policy (“University Procedures”), which can be found here. If the person alleged to have violated the University Policy is not a student, ODR will refer the case to the relevant Title IX Coordinators and other representatives of HMS, as appropriate.

Under the University Procedures, ODR is responsible for determining whether a violation of the University Policy by a student took place. HMS remains responsible for Master’s student discipline through the Academic Progress and Review Board for Master’s Programs (APRB). Whenever a formal complaint of sexual or gender-based harassment against an HMS Master’s student results in the issuance of a final report from the ODR, the APRB must accept as final and non-reviewable the report’s findings of fact and its conclusions as to whether a violation of the University Policy has occurred. The APRB’s disciplinary proceedings against that student based on conduct addressed by the report will proceed with
the understanding that the final report carries the same validity as a determination reached by the APRB itself.

*For all other allegations:* The Master’s Programs are committed to addressing allegations of student mistreatment in a manner that protects students from potential retaliation or reprisals. At the same time, implementation of the policy requires thoughtful and fair treatment of faculty and others against whom allegations of student mistreatment may be brought. When an allegation of mistreatment is received by the Dean for Basic Science and Graduate Education, he/she will make a determination of whether the event warrants immediate action or should be aggregated with other such events (to limit potential identification of the complainant, which could lead to retaliation) before remediation is pursued. Similarly, when allegations of mistreatment appear on required student course evaluations, the programs will collate the reports and make a similar determination of whether immediate action or a delay in releasing the comments to faculty is warranted.

The Office of the Dean for Basic Science and Graduate Education will work with offices at affiliated institutions to address complaints of mistreatment arising during the mentored research or capstone project experience. In addition, the Master’s programs’ leadership will communicate with appropriate directors/mentors for complaints against affiliated-institution-based individuals, with division chiefs and/or department chairs for complaints about faculty, and with affiliated institution leaders for complaints about department chairs.

In cases where there is significant uncertainty and ambiguity, the Dean for Basic Science and Graduate Education will appoint a joint faculty-student ad hoc committee to consider the complaint of mistreatment and will rely on the committee’s recommendation for reporting and remediation.

Cases of alleged harassment by Master’s students will be adjudicated by the Harvard Medical School Academic Progress and Review Board (Section 4).

**Resources**

A student may seek counsel in a matter involving mistreatment, discrimination, affirmative action, or harassment through an appropriate officer, such as the HMS Ombudsperson; the University Title IX Officer or an HMS Title IX Coordinator; a Program Director; a faculty advisor/mentor; a course, director; the coordinator of services for students with disabilities; or other Harvard Medical School or affiliated institution official.

**Programs (Section 3.02)**

Office for Graduate Education (Section 3.04)

[Office for Sexual and Gender-Based Dispute Resolution](#)
HMS Title IX Coordinators (Section 10.16)

Coordinator of Disability Services (Section 10.03)

Ombuds Office

HMS (Section 10.05)

HU

Affiliated institutions: The affiliated hospitals and institutions may have their own policies pertaining to your concern. Discuss your issue with the HMS Ombudsperson and/or check with the appropriate office in the institution in which you conducting your research or capstone project.

7.17 Stalking

“Stalking” another person is a serious crime. Massachusetts General Laws Chapter 265, Section 43 provides that anyone who willfully, maliciously, and repeatedly follows or harasses another and who makes a threat with the intent to place that person in imminent fear of death or serious bodily injury is guilty of a felony punishable by a jail term and/or fine.

Anyone who feels he/she is being followed, harassed, or threatened should receive the advice and assistance of the Harvard University Police Department Sensitive Crime Unit/Sexual Assault Unit in Cambridge at 617-495-1796 from 9:00 a.m.–5:00 p.m. After these hours, students should contact the Harvard University Police Department at 617-432-1212.

7.18 Missing Persons Policy

As required under federal law, Harvard Medical School immediately will refer to the Harvard University Police Department any missing persons report involving a student who lives in on-campus housing. If any member of the Harvard community has reason to believe that a student who resides in on-campus housing is missing, he or she should immediately notify HUPD at 617-495-1212. If HUPD determines that the student has been missing for more than 24 hours, then, within the 24 hours following this determination, the School or HUPD will:

1. notify an appropriate external law enforcement agency;
2. contact anyone the student has identified as a missing person contact under the procedures described below; and
3. notify others at the University, as appropriate, about the student’s disappearance.

In addition to identifying a general emergency contact person, students residing in on-campus housing have the option to identify confidentially a separate person to be contacted by Harvard in the event that the student is determined to be missing for more than 24 hours. Students are not required to designate a separate individual for this purpose and if they choose not to do so then Harvard will assume that they have chosen to treat their general emergency contact as their missing person contact. Students who wish to identify a confidential missing person contact should notify the Registrar. A student’s confidential
missing person contact information will be accessible only by authorized campus officials and by law enforcement in the course of an investigation. In addition, if it has been determined that a student who is under 18 years of age and not emancipated has been missing for more than 24 hours, then the Harvard Medical School or HUPD will contact that student’s custodial parent or guardian. Students are reminded that they must provide the Registrar with emergency contact information and/or confidential missing person contact information.

7.19 Emergency Notification System

All students are required to sign up to receive emergency notifications from Harvard University’s Community Emergency Notification System called MessageMe, which allows the University to quickly distribute critical information to you, wherever you are located, during an emergency.

MessageMe helps you to stay informed in the event of an emergency by sending alerts to your personal electronic device (cell phone, pda, smartphone, etc.) through text messaging, voice, and/or e-mail.

Students can sign up for the Emergency Notification Service by going to https://messageme.harvard.edu/ or through MyCourses (http://mycourses.med.harvard.edu/). Instructions for MyCourses are as follows: Click on My Account in the upper right corner of the page, click on Email Settings. Click on the button, Register/Update MessageMe under the MessageMe Preferences panel and follow the directions to register for this service.

7.20 Digital Millennium Copyright Act: Annual Notice to Students, Harvard University, Office of the University CIO

Harvard's network infrastructure is a vital University asset. It enables the academic and research activities of the various Schools and faculties; fosters informed communication with colleagues on campus and around the world; transfers medical images that assist in patient diagnosis; provides remote building monitoring; facilitates the day to day business of education at Harvard; and supports our residential community's personal networking interests. Access to the Harvard network is provided to faculty, staff, and students primarily to support these and other University mission-related endeavors. As a vital and costly shared resource, the optimization and management of the network is important to us all.

An equally vital University interest is Harvard's compliance with copyright and information security laws. The University prohibits the use of the Harvard network for illegal activities. Examples of relevant policies include the Harvard Personnel Manual - "University Policies" and Harvard University computer rules and responsibilities.

Federal law prohibits the reproduction, distribution, public display or public performance of copyrighted materials over the Internet without permission of the copyright holder, except in accordance with fair use or other specifically applicable statutory exceptions. Harvard may terminate the network access of users who are found to have repeatedly infringed the copyrights of others. In addition, unauthorized distribution of copyrighted material, including unauthorized peer-to-peer file sharing, may subject you to civil and criminal liabilities. Harvard complies fully with the federal Digital Millennium Copyright Act of 1998 ("DMCA") and has in place the mandated process for receiving and tracking alleged incidents of copyright infringement.
Harvard network users should be aware of recent changes in the pre-subpoena notification approach employed by the Recording Industry Association of America (RIAA). These changes include notices requesting the preservation of records in advance of a subpoena, and notices providing an option for users to settle in advance of potential lawsuits. University policy remains unchanged. We will continue to comply with the Digital Millennium Copyright Act and federal law pertaining to DMCA subpoenas, and will continue to update the community of significant changes to process or law.

The University is committed to maintaining the integrity and availability of the Harvard network for vital educational and research purposes for which it was designed. We recommend that you become familiar with the laws pertaining to the use of digital material and to comply with federal law and University policy regarding use of copyrighted materials. More information may be found at [http://www.copyright.gov/legislation/dmca.pdf](http://www.copyright.gov/legislation/dmca.pdf).

### 7.21 University-Wide Statement on Rights and Responsibilities


The central functions of an academic community are learning, teaching, research and scholarship. By accepting membership in the University, an individual joins a community ideally characterized by free expression, free inquiry, intellectual honesty, respect for the dignity of others, and openness to constructive change. The rights and responsibilities exercised within the community must be compatible with these qualities.

The rights of members of the University are not fundamentally different from those of other members of society. The University, however, has a special autonomy and reasoned dissent plays a particularly vital part in its existence. All members of the University have the right to press for action on matters of concern by any appropriate means. The University must affirm, assure and protect the rights of its members to organize and join political associations, convene and conduct public meetings, publicly demonstrate and picket in orderly fashion, advocate and publicize opinion by print, sign, and voice.

The University places special emphasis, as well, upon certain values which are essential to its nature as an academic community. Among these are freedom of speech and academic freedom, freedom from personal force and violence, and freedom of movement. Interference with any of these freedoms must be regarded as a serious violation of the personal rights upon which the community is based. Furthermore, although the administrative process and activities of the University cannot be ends in themselves, such functions are vital to the orderly pursuit of the work of all members of the University. Therefore, interference with members of the University in performance of their normal duties and activities must be regarded as unacceptable obstruction of the essential processes of the University. Theft or willful destruction of the property of the University or its members must also be considered as unacceptable violation of the rights of individuals or of the community as a whole.

Moreover, it is the responsibility of all members of the academic community to maintain an atmosphere in which violations of rights are unlikely to occur and to develop processes by which these rights are fully assured. In particular, it is the responsibility of officers of administration and instruction to be alert to the
needs of the University community; to give full and fair hearing to reasoned expressions of grievances; and to respond promptly and in good faith to such expressions and to widely expressed needs for change. In making decisions which concern the community as a whole or any part of the community, officers are expected to consult with those affected by the decisions. Failures to meet these responsibilities may be profoundly damaging to the life of the University. Therefore, the University community has the right to establish orderly procedures consistent with imperatives of academic freedom to assess the policies and assure the responsibility of those whose decisions affect the life of the University.

No violation of the rights of members of the University, nor any failure to meet responsibilities, should be interpreted as justifying any violation of the rights of members of the University. All members of the community — students and officers alike — should uphold the rights and responsibilities expressed in this Statement if the University is to be characterized by mutual respect and trust.

Interpretation

It is implicit in the language of the Statement on Rights and Responsibilities that intense personal harassment of such a character as to amount to grave disrespect for the dignity of others be regarded as an unacceptable violation of the personal rights on which the University is based.

It is implicit in the University-wide Statement on Rights and Responsibilities that any unauthorized occupation of a University building, or any part of it, that interferes with the ability of members of the University to perform their normal activities constitutes unacceptable conduct in violation of the Statement and is subject to appropriate discipline.

This University-wide Statement and its first interpretation were adopted on an interim basis by the Governing Boards on September 20, 1970, and were voted to remain in effect indefinitely in May 1977. The second interpretation was adopted by the Governing Boards in January-February 2002.

See also Section 4.08.

7.22 Minors on Campus Policy

Master’s students are advised to review the HMS Minors on Campus Policy.

7.23 Harvard University Policy on Access to Electronic Information

Harvard established a policy that sets out guidelines and processes for University access to user electronic information stored in or transmitted through any University system. This policy applies to all Schools and units of the University.

7.24 Crime Awareness and Campus Security for Members of the Harvard Community

The Harvard University Police Department is committed to assisting all members of the Harvard community in providing for their own safety and security. Harvard’s annual security report, prepared in compliance with The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (the “Clery Act”), is entitled Playing it Safe, and can be found on the HUPD’s website.
Playing it Safe includes information about the HUPD, how to report a crime, HUPD’s crime prevention programs, substance abuse, sensitive crimes, and other important information about security and HUPD services on campus. It also contains three years of statistics on reported campus or campus-related crimes. A hard copy of Playing it Safe may be obtained by contacting the Harvard University Police Department at 1033 Massachusetts Avenue, 6th floor, Cambridge, MA 02138, (617) 495-1215.

8. Housing and Dining Services

8.01 Vanderbilt Hall

Vanderbilt Hall, located at the corner of Avenue Louis Pasteur and Longwood Avenue, is the residence hall for Harvard Medical School (HMS) and the Harvard School of Dental Medicine (HSDM). It also houses students from the Division of Medical Sciences (DMS) and the Harvard School of Public Health (HSPH), as well as visiting students and scholars from all over the nation and the world. The Vanderbilt Business Office is open from 8 a.m. to 6 p.m., Monday through Friday. The telephone number is 617-432-1630.

Student Affairs in Vanderbilt Hall

A Resident Counselor for Student Affairs lives in Vanderbilt Hall and is available to meet with students by appointment. She is also available in cases of emergency and to discuss urgent problems. The Resident Counselor provides counseling and advising and is responsible for overseeing and supporting the personal and professional development of students living in Vanderbilt Hall. The Resident Counselor’s apartment is located on the FIRST FLOOR at ENTRY J.

Under the direction of the Resident Counselor, student Resident Advisors (RAs) who live in Vanderbilt Hall are responsible for dedicated sections of each floor. The RA’s role is to promote a sense of community that supports the personal and professional development of students within the assigned living unit.

Eligibility for Occupancy

1. Residence in the Hall is primarily for matriculated pre-doctoral students registered full-time in a degree program at the Harvard Medical School, the School of Dental Medicine, or the Division of Medical Sciences. Master’s students, non-matriculated Visiting Scholars of the Medical School and full-time students who are registered in degree programs at other Harvard Schools are also eligible if space is available.
2. Priority for residence in Vanderbilt Hall is given to first-year students in the degree programs identified above.
3. Residence in the Hall for students after their first year of residence is subject to availability. Students may be asked to seek other accommodations after their first year of residence, or after any subsequent year of residence, to allow space for incoming students. Students asked to relocate will be notified by April 30 and will be expected to vacate on or before August 1. As a general rule, students who have been in residence longest will be the first asked to relocate.
Please go to the Vanderbilt Hall website at http://hms.harvard.edu/content/vanderbilt-hall for more information.

8.02 Harvard University Housing

Harvard University Housing (HUH) manages a portfolio of approximately 3,000 units. Full-time Harvard students, faculty, and employees are eligible to apply for this housing. Many properties are within a one-mile radius of Harvard Yard; Harvard @ Trilogy is close to the Harvard Longwood Campus. Please visit the website for more information. You will find eligibility guidelines, detailed instructions for submitting an application, property photos and amenities, special housing options, a roommate listing service, and more.

Phone: 617-496-7827
E-mail: huhousing@harvard.edu
Web: www.huhousing.harvard.edu

8.03 Off-Campus Housing

The Harvard Longwood Campus Off-Campus Housing Office is an extension of the Vanderbilt Hall Business Office. Off-campus apartment and roommate listings are available at http://hms.harvard.edu/departments/vanderbilt-hall. They are also posted on bulletin boards in the Vanderbilt Hall lobby. If you are interested in renting directly from Harvard University or outside the Harvard Longwood Campus area, call the Harvard University Housing Office located in Smith Campus Center in Cambridge at 617-495-3377.

8.04 Housing for Students with Disabilities

Students with disabilities for whom safety and proximity to essential locations, such as bathrooms, accessible entrances, transportation, and meals, is necessary must make these needs known immediately following admission, or as soon as the need is clinically documented, so that proper campus area housing arrangements (if available) can be facilitated. Students bringing medically-related equipment should so declare to ensure adequate electrical or other considerations. In some circumstances, visiting rooms in advance may be advisable to avoid incompatible arrangements.

Clinical documentation provided to the Master’s Student Disability Services Coordinator (see Section 10.02) is always necessary to request such housing assignments. The University reserves the right to change a pre-existing housing assignment, even temporarily, if a disability-related life-safety concern exists.

For information about accessible residence hall housing, contact the Vanderbilt Hall Business Office at 617-432-1629.

8.05 Housing for Married Students or Students with Children

University-owned housing for married students and students with children is limited largely to Harvard-Affiliated Housing available through Harvard Real Estate Services. A few opportunities exist for married
students to become resident tutors in undergraduate houses or freshman proctors in the freshman dormitories.

Visit the Harvard University Housing website for more information.

8.06 Campus Dining

Restaurant Associates, the food service management team at Harvard Medical School, offers service at three area locations:

- **Courtyard Cafe**
  Warren Alpert Building
- **Atrium Cafe**
  Tosteson Medical Education Center
- **Elements Cafe and Specialty Shop**
  New Research Building

For more information, please visit the Restaurant Associates website.

8.07 Crimson Cash

Crimson Cash is a debit card system, accessed through your Harvard ID, for on-campus services and a select but growing number of off-campus services. Crimson Cash is discretionary—you may use it or not as you wish, and you determine how much money you add to Crimson Cash. Crimson Cash has no service charges and does not expire as long as you have a valid Harvard ID. For more information, go to [http://www.cash.harvard.edu/](http://www.cash.harvard.edu/).

9. Student Health

9.01 General Information

**Personal Responsibility:** Harvard Medical School encourages Master’s students to pay close attention to immunization, standard precautions, and other preventive measures. The following sections outline these measures. Anyone who expects to spend time in a clinical facility must also meet the requirements of that facility for any and all immunizations and vaccinations.

**Immunization:** Under Commonwealth of Massachusetts legislation, students must present evidence of vaccination against measles, mumps, rubella, tetanus, diphtheria, pertussis and hepatitis B in order to matriculate at Harvard Medical School. Students should have received one dose of Tdap (Tetanus,
Diphtheria, acellular Pertussis) booster vaccine. In addition, Harvard Medical School requires students to have blood tests to verify serologic immunity to measles, mumps, rubella and hepatitis B (see below for more about hepatitis B) and either vaccination or serologic immunity to varicella (chicken pox).

The Centers for Disease Control and Prevention (CDC) and the Association of American Medical Colleges (AAMC) urge that all students present proof of immunity to polio. Having a record of other immunizations you may have received would be helpful for Harvard University Health Services.

All students are required to have a tuberculin skin test during the six months before matriculation and every year thereafter. The test must be read by a physician or a nurse practitioner and documented in writing. Students known to be skin-test positive should consult a physician at the Medical Area Health Service (MAHS) of HUHS, as should those exposed to patients with active tuberculosis.

Master’s students who have not been tested for serologic immunity or who have not followed the recommended tuberculosis testing schedule will not be allowed to conduct their mentored research or capstone project in an affiliated institution. Vaccinations, serologic testing and tuberculosis skin testing are available to Master’s students through the MAHS. Charges for vaccinations may apply.

N.B.: A history of having had measles, mumps, rubella (German measles), or hepatitis B does not meet the respective requirement. Only documentation of a blood test for antibodies to the disease agent is acceptable.

The only circumstances under which you may be exempted from the Massachusetts Immunization Law and the requirements of Harvard Medical School for serologies are as follow:

- You have certification, in writing, by a physician who has personally examined you and is of the opinion that your physical condition is such that your health would be endangered by one or more of the required immunizations; or
- You state in writing that such immunizations as required would conflict with your religious beliefs.

**Infection Control:** Students exposed to or with infectious or communicable illnesses, including diarrheal illness; pertussis (whooping cough); shingles; tuberculosis (TB); methicillin resistant Staph. aureus (MRSA) infection; Group A strep. infection; or draining lesions on the hands, must consult with HUHS/MAHS. In addition, a student in such circumstances should consult with the infection control office in the institution wherein the exposure occurred about the advisability of continuing to work in a setting that provides clinical care and to be sure he/she is following the local regulations. When for the student’s mentored research or capstone project involves human research subjects with certain respiratory infectious diseases, students must adhere to local regulations regarding precautions, including wearing appropriate masks. (see 9.09).

**Hepatitis B:** Harvard Medical School adheres to recommendations by the Centers for Disease Control and Prevention (CDC) for management of hepatitis B-infected health-care providers and students (http://www.cdc.gov/mmwr/PDF/rr/rr6103.pdf or www.cdc.gov/mmwr/preview/mmwrhtml/rr6103a1.htm) and complies with nondiscrimination obligations under the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, and Title VI of the Civil
Rights Act. CDC recommendations focus on HBV-infected health care providers and students who perform “exposure-prone procedures” that pose an increased risk of provider-to-patient transmission of hepatitis B (See CDC Recommendations above, Table 2: BOX. CDC classification of exposure-prone patient care procedures, Category I). Such procedures include, for example, major abdominal, cardiothoracic, and orthopedic surgery; repair of major traumatic injuries; vaginal deliveries; and major oral or maxillofacial surgery. According to the CDC, “Category I procedures, especially those that have been implicated in HBV transmission, are not ordinarily performed by students fulfilling the essential functions of a medical or dental school education.” No oversight by an expert panel is required for the kinds of procedures ordinarily performed by medical students, e.g., phlebotomy, placing of intravenous lines, medication injections, needle biopsies, lumbar puncture, insertion of tubes (nasogastric, endotracheal, rectal, urinary catheters), endoscopic/bronchoscopic procedures, etc.

**9.02 Harvard University Health Services (HUHS)**

Harvard University Health Services

Harvard University Health Services (HUHS) provides comprehensive primary and specialty care to the Harvard community. The main location is in the Smith Campus Center in Harvard Square, and satellite clinics are located on the Business School, Law School, and Medical Area campuses. The Medical Area Clinic is located on the first floor of the west wing of Vanderbilt Hall. Patients are seen by appointment except in cases of emergency. Visit [huhs.harvard.edu](http://huhs.harvard.edu) for additional information. Urgent Care for non-routine, urgent medical concerns or symptoms is available 24 hours a day at the Smith Campus Center location in Harvard Square. Students can schedule same-day non-routine appointments online through the Patient Portal or by calling 617-495-5711. Whenever possible, students are encouraged to call their health care team or mental health provider for advice during regular office hours. The Student Health Fee covers most medical and mental health care provided at HUHS facilities.

Students intending to use HUHS as their primary care provider are encouraged to establish a relationship with one of the internists at the Medical Area Clinic soon after arrival. Students should make an appointment for a medical history and a physical examination. Students are urged to take advantage of this opportunity to review the state of their health and to become acquainted with a specific physician or nurse practitioner whom the student may choose to see at future visits.

**Harvard University Student Health Program (HUSHP)**

All Harvard University students who are registered as more than half time pay the Harvard University Student Health Program (HUSHP) Student Health Fee, which enables them to use HUHS without additional charge for most services. Students who are half time or less can waive the Student Health Fee. Please note, students who waive the Student Health Fee as half time or less must also waive the Student Health Insurance Plan component. Additional information regarding waiving the Student Health Fee (and waiving in general) can be found on the HUSHP website [here](http://hushp.harvard.edu/waiver-eligibility-application) (Select + WAIVING THE STUDENT HEALTH FEE). Students’ dependents may also enroll in HUSHP. Please refer to [hushp.harvard.edu](http://hushp.harvard.edu) and to Sections 6.04: Medical Fees and 9.03: Harvard University Student Health Program (HUSHP) for more information.
Counseling and Mental Health Services (CAMHS): HUHS Counseling and Mental Health Services (CAMHS) provides coverage to students year round. Counseling is available for a wide variety of concerns, including:

- Bereavement
- Transitional issues and adjustment difficulties
- Depression, anxiety, or stress
- Concerns interfering with work or relationships
- Sexual concerns
- High-risk behaviors around food, alcohol, and/or other substances

Treatment options include individual psychotherapy, medication management, and group therapy. All visits are confidential and mental health records are held separately from the rest of the medical record, except for information on medications and hospitalizations. Counseling and Mental Health Services are also offered at satellite health clinics on the Business School, Law School, and Medical Area campuses. Please visit [huhs.harvard.edu/camhs](http://huhs.harvard.edu/camhs) for more information.

Medical Specialty Care: A wide range of medical specialty services, including surgical and medical subspecialties, is available at Harvard University Health Services at the Smith Campus Center location in Harvard Square. Appointments are made by referral from one of the Medical Area Clinic physicians or nurse practitioners.

Dental Care: Dental coverage is not included in the Harvard University Student Health Program (HUSHP); however, an optional dental plan is available for students and their eligible dependents. Rates and enrollment and benefit information are available on the [HUSHP website](http://www.huspm.com).

The Harvard Dental Service in Harvard Square also provides a full array of dental services at a discount to Harvard students. Full dental care is also available to students on a fee-for-service basis at the Harvard School of Dental Medicine’s Faculty Group Practice on Longwood Avenue and at the Student Clinic of the Harvard School of Dental Medicine.

Medical Area Clinic

Vanderbilt Hall
275 Longwood Avenue
Boston, MA 02115

Information and Appointments

617-432-1370

Hours of Operation

Monday & Thursday
9:00 am – 6:30 pm
Tuesday, Wednesday, Friday
9:00 am – 5:00 pm
Fax

617-432-7120

9.03 Student Health Program

Detailed information regarding the Harvard University Student Health Program (HUSHP) can be found at hushp.harvard.edu. Students should read the details of the Plan carefully and familiarize themselves with the coverage available. Students with questions should contact HUSHP Member Services at mservices@huhs.harvard.edu. For information about fees, see Sections 6.01 (Tuition, Fees, and Living Expenses) and 6.04 (Medical Fees).

Massachusetts Insurance Requirements: Massachusetts law requires that all full-time or part-time students enrolled in an institution of higher learning in Massachusetts participate in a qualifying student health insurance program or in a health plan of comparable coverage. All Harvard students are automatically enrolled in the Harvard University Student Health Program (HUSHP) and charges are applied to their student bill.

HUSHP is a comprehensive health program comprised of two parts:

Student Health Fee: Required of all students who are more than half-time and studying in Massachusetts. This fee covers most services at Harvard University Health Services (HUHS), including internal medicine, medical/surgical specialty care, mental health/counseling services, physical therapy, radiology, and urgent care.

Student Health Insurance Plan: Provides hospital/specialty care through Blue Cross Blue Shield of Massachusetts and prescription drug coverage administered by Catamaran. Coverage includes emergency room visits, hospitalizations, diagnostic lab/radiology services, ambulatory surgery, specialty care outside HUHS (limited), and prescription drug coverage. Benefit limits and cost-sharing may apply – visit hushp.harvard.edu for more details.

Waiving the Student Health Insurance Plan

Students enrolled in a comparable health insurance plan may be eligible to waive the Student Health Insurance Plan. Waivers must be completed by the appropriate deadline or the charges will remain on the student’s term bill. Information regarding waiving the Student Health Insurance Plan and fees can be found on the HUSHP website, hushp.harvard.edu/waive. Before waiving, students should carefully evaluate whether their existing health plan will provide adequate, comprehensive coverage in the Boston area. Visit the HUSHP website to review a waiver checklist for guidance. Students who waive the Student Health Insurance Plan will be fully responsible for all medical claims and prescription drug costs.

- International students studying on campus at Harvard are not eligible to waive the Student Health Insurance Plan with foreign insurance, including those with a U.S.-based administrator. This is a requirement pursuant to the Massachusetts student health program regulations.
Only a limited number of students who meet certain criteria are also able to waive the Student Health Fee. Visit hushp.harvard.edu for additional waiver information and the online waiver application.

9.04 Work-Related HIV Benefit Plan

Harvard provides a work-related HIV benefit plan for medical and dental students only. This policy does not apply to Master’s students. Information about this benefit may be found in Section 9.04 of the HMS Handbook for medical students.

9.05 Center for Wellness

The Center for Wellness is a University-wide resource that is focused on promoting the lifelong health and well being of those in the Harvard community. The approach is threefold and focuses on mind/body wellness. The Center for Wellness offers group classes and workshops, individual appointments for massage and acupuncture, and collaborates with a number of student groups and other offices around the University in health promotion and education. For more information or to schedule appointments, visit cw.huhs.harvard.edu.

9.06 Reproductive Health

Harvard Medical School is committed to providing as safe an environment as possible for all students.

If a student will be working with or around radioactive materials, Harvard’s Radiation Protection Office (46 Blackstone St., Cambridge, 617-496-3797 or 24-hour emergency number, 617-495-5560) can provide confidential consultation and can enroll the student in the declared pregnant program.

For information about the reproductive risks of working with biological, chemical, and physical agents other than radiation in laboratory and/or clinical settings, the Associate Director of Laboratory Safety Programs, under the University’s safety office, is also available at 617-496-4746 for individual consultation with any interested male or female student. Information is also available from the Harvard Environmental Health and Safety website.

Master’s students conducting research in an affiliated hospital who have specific concerns about reproductive health may wish to contact the Safety Officer in that hospital.

Master’s students who wish to pump breast milk may use the private and comfortable breastfeeding rooms at HMS, HSPH, and HSDM. The rooms are equipped with Medela “Lactina Select” pumps. These rooms are also equipped to provide information about using the pumps, where to purchase necessary personal accessories, books and pamphlets about breastfeeding, and contact numbers for professional lactation consultants who can provide problem solving and education.

Breastfeeding rooms are located at:

- **TMEC (HMS)**, Room 444, 260 Longwood Avenue, HMS
- **Kresge Building (HSPH)**, Ground Level Women’s Lounge, Room G11A, HSPH
- **Harvard Institutes of Medicine**, Room 1C4, 4 Blackfan Circle
9.07 Standard Precautions

Students working in the laboratory, in clinical simulations (such as teaching sessions that involve practice on volunteers or fellow students), or with patients or human subjects research participants, should follow standard precautions at all times:

1. Always wash your hands or use a hand sanitizer before and after touching a patient, after using the restroom, and after touching a contaminated surface. Infections are caused by bacteria or viruses MOST COMMONLY SPREAD BY UNWASHED HANDS.
2. Consider all blood, all body fluids, and all mucous membranes or non-intact skin from ALL PATIENTS to be infectious.
3. Wear gloves when exposure to blood, body fluids, mucous membranes, or non-intact skin may occur. Change your gloves and wash your hands after each procedure and before contact with another patient.
4. Wear a mask and protective eyewear (or face shield) when blood or body fluids may splash into your face.
5. Wear a fluid resistant gown during activity that may generate splashes or sprays of blood, body fluids, secretions, or excretions.
6. DO NOT RECAP NEEDLES OR SHARPS after use. Place all disposable sharps into puncture-proof containers immediately after use. Locate the designated container before you begin the procedure.
7. Always use needle safety devices when available and activate the safety feature.

Precautions Against Exposures of Particularly Dangerous Infections: Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), Human Immunodeficiency Virus (HIV)

Students should report immediately all incidents of exposure to blood and bodily fluid of the following natures: parenteral (needlestick or cut); mucous membrane (splash to eyes, nose or mouth); or cutaneous (contact with blood or body fluids on ungloved hands or other skin surfaces that may be cut, chapped, abraded, or affected by active dermatitis).

Potential benefit of prophylactic intervention for all of these infections is time-dependent. For maximal benefit, intervention SHOULD BE INITIATED IN THE INITIAL HOURS AFTER EXPOSURE, particularly after exposure to HIV.
What to Do in Case of a Needlestick or Other Direct Exposure:

Immediate Response

- Clean wound with soap and water (special products are not necessary);
- Apply direct pressure if needed; and
- Flush mucous membranes with water or saline for 15 minutes.

After First Aid

PROMPT NOTIFICATION IS CRITICAL; TREATMENT OPTIONS MAY INCLUDE ANTI-HIV THERAPY OR HEPATITIS B IMMUNE GLOBULIN (HBIG).

- Call 617-384-7845 (617-384-STIK), and you will hear a recorded message with the name and page number of the on-call HUHS physician.
- Page the on-call HUHS physician for advice and assistance in obtaining a timely evaluation and proper follow-up care.

The HUHS on-call physician will help determine whether to have an initial evaluation at the institution where the incident occurred, at the Medical Area Clinic, or Harvard University Health Services (Smith Campus Center) in Harvard Square. All subsequent care for the exposure should occur at the Medical Area Clinic. **Follow-up care given outside HUHS/Medical Area Clinic may be billed to the student.** Laboratory testing is billed to the Student Health Insurance Plan or the student’s alternative health insurance plan. Students are also advised to notify the infection control office in the institution where the incident occurred.

These instructions are included in the pamphlet “Protecting Yourself and Your Patients from Infection: Guidelines for Harvard Medical and Dental Students,” available through the Registrar’s Office, or in the “Guide to the Wards” handbook, available from the Office of Student Affairs. For more information, including contact information at Harvard’s teaching sites, consult [huhs.harvard.edu/bloodborne-pathogen-exposure-protocol-hms-hsdm-students](http://huhs.harvard.edu/bloodborne-pathogen-exposure-protocol-hms-hsdm-students).

9.08 Disability Insurance

HMS Master’s students are not required to have disability insurance while enrolled as a Master’s student.

9.09 Precautions against Communicable Diseases

Students exposed to, or with, infectious or communicable illnesses, including diarrheal illness; pertussis (whooping cough); shingles; tuberculosis (TB); methicillin resistant staph. aureus (MRSA) infection; Group A strep. infection; or draining lesions on the hands; must consult with Harvard University Health Services/Medical Area Clinic. In addition, students in such circumstances should consult with the infection control office in the institution wherein the exposure occurred or where the student may be involved in clinical research about the advisability of working with patients and to be sure he/she is following the local regulations. When working with human research subjects with certain respiratory
infectious diseases, students must adhere to local regulations regarding precautions, including wearing appropriate masks.

All medical and dental students are required to have a tuberculin skin test during the 6 months before matriculation and every year thereafter. The test must be read by a physician or a nurse practitioner and documented in writing. Students known to be skin-test positive should consult a physician at the Medical Area Clinic, as should those exposed to patients with active tuberculosis.

9.10 Drug and Alcohol Abuse and Dependence

Physician Health Services

Steve Adelman, MD, Director

1-781-434-7404 or 1-800-322-2303, ext. 7404

From time to time, physicians confront health problems that have the potential to interfere with the ability to practice medicine. Among the threats to physician health are substance use disorders, along with a variety of mental, behavioral, and medical problems. Without proper treatment, these conditions can jeopardize health and well-being, disrupt families, and ruin careers. Many students who have concerns about these problems feel inhibited from seeking help from the Harvard University Health Services (HUHS), even though HUHS is completely confidential and separate from the administration of the Medical School.

The Massachusetts Medical Society has established the Physician Health Services (PHS) to help physicians with these issues. PHS is a nonprofit outreach, support, and monitoring program that handles all referrals in a compassionate and confidential manner. Participation in the program is voluntary. Master’s students who are physicians and have had health-related problems may find PHS helpful for recovering from substance use disorders and for resolving other health concerns.

Any student who has a concern about drug or alcohol use, a behavioral health concern, or a mental or physical illness should feel free to talk to his or her physician at the Harvard University Health Services.

10. Services and Programs

10.01 The Office of Communications and External Relations

The Office of Communications and External Relations (OCER) manages Harvard Medical School communications with internal and external stakeholders in a proactive, timely manner, ensuring integrity, credibility and openness. The Office promotes the School’s intellectual, educational and scientific contributions to society, working through partnerships to build trust, confidence and community. The Office also supports the School’s role as a thought leader that informs policy related to biomedicine and medical education, and enhances public confidence in the scientific enterprise.
Key responsibilities:

- **Governs and enhances the HMS brand identity** to ensure that it consistently reflects the School’s core values and that there is compliance in the application of name use and graphic standards;
- **Develops innovative strategies to communicate the School’s priorities as well as education, research and other news** in a manner consistent with the School’s reputation as the world’s leading medical school, utilizing the influence of the Dean’s office as well as traditional and novel forms of print, online and other media and public programs to effectively reach the general public, key stakeholders and the HMS community, including the School’s 16 affiliated hospitals and institutes;
- **Supports the Dean’s office in** developing sophisticated and coordinated communications for both internal and external audiences;
- **Maintains a News Office that is respected for the integrity of its communications** and that provides training in science writing and enrichment in science journalism for student writers, scientists and working journalists;
- **Works with the School’s leadership to develop an internal culture** that is engaged and collaborative, and that empowers faculty, staff and students to reflect and communicate the School’s values and mission;
- **Supports fundraising communications** to help ensure that donors, friends and the HMS Board of Fellows have access to information concerning educational and scientific initiatives and news;
- **Works in tandem with Harvard University** leadership to ensure coordinated communications with particular collaboration around government relations and community benefits.

OCER asks students to sign a photo release form in order for OCER to use photos of students taken at HMS events and activities, including the Master’s graduation and research symposium. Students are not obligated to comply with the request.

**10.02 Services for Students with Disabilities**

*Policy Statement*

Harvard Medical School (HMS) complies with federal and state law prohibiting discrimination against any applicant or enrolled student on the basis of race, color, religion, sexual preference, age, disability, or other protected status. In accordance with its obligations under the Americans with Disabilities Act of 1990 and Section 5.04 of the Rehabilitation Act of 1973, Harvard Medical School does not discriminate against qualified individuals with disabilities in admission or in access to programs and activities.

A person with a disability is someone who has a physical or mental impairment that limits substantially one or more major life activity, such as caring for one's self, performing manual tasks, learning, walking, seeing, hearing, breathing, and working; has a record of such an impairment; or is regarded as having such an impairment.

Although students with temporary illness or injury are not considered disabled by law, every reasonable effort to accommodate their needs will be exercised.
All requests for accommodation (e.g., use of a computer, extra time and/or separate room for exams, reduced caseload, access to note-takers, taped books, etc.) are evaluated on a case-by-case basis. This evaluation includes the review of clinical documentation and a determination of the reasonableness of the accommodation requests. Primary clinical documentation or other diagnostic information held by the Master’s Disability Coordinator (see Procedure for Review of Accommodation Requests, below) is kept confidential and is released to a third party only with the student's written permission or as required by law. General information about a student's disability and accommodation request(s), however, may be shared with other Harvard officials or, in limited circumstances, with third parties who have a legitimate need to know. The student's disabilities file is maintained by the Disability Coordinator and is held separately from the student's official academic record.

Although disclosure of a disability may not be necessary or appropriate for some persons, those who seek reasonable accommodations from HMS must follow the procedures outlined below. Considering the pros and cons of disclosure is important. Harvard Medical School is committed to ensuring a supportive environment for students with disabilities by providing the opportunity for full participation in the academic resources of the campus community. The Disability Coordinator may consult with the student’s program regarding further evaluation and specialized tutoring, when appropriate.

Procedure for Review of Accommodation Requests

HMS students are expected to be actively responsible for all aspects of their enrollment. Students requesting accommodations must take the initiative to seek assistance, comply with deadlines and agreements, and participate in the following procedure:

1. **Contact the Disability Coordinator**
   HMS students requesting accommodations should contact the Master’s Disability Coordinator, 25 Shattuck Street, Gordon Hall, Room 001, Boston, MA 02115; email: HMS_Masters_Programs@hms.harvard.edu. This contact should take place at least three weeks prior to the start of a term or course, or immediately following an injury or illness, in order to disclose a disability/illness/injury and to initiate accommodation(s).

2. **Provide clinical documentation**
   In initiating the accommodation process, the student must submit current clinical documentation that supports the request for accommodation(s).

   **Learning, Attentional Disabilities:** Acceptable clinical documentation for learning disabilities (LD) and attentional disabilities (e.g., attention-deficit hyperactivity disorder [ADHD]) includes a comprehensive diagnostic interview/consultation and neuropsychological or psycho-educational evaluation plan, which typically should be completed within the three years prior to entering Harvard Medical School. The three-year currency requirement may be waived upon application and in appropriate circumstances. (See the Guidelines for Documentation of LD and Attentional Disabilities related to ADHD, below.)

   **Other/Non-learning Disabilities:** Acceptable documentation for other types of disabilities (e.g., medical, psychological, etc.), either permanent or temporary, includes a report from a professional describing the nature of the disability, suggested accommodation(s), and the expected duration of
the disability and requested accommodation(s). (See the Guidelines for Documentation of Medical and Psychological Disabilities.) In all cases, the School reserves the right to request additional diagnostic information and assessment when, in its opinion, such additional information is needed to indicate the existence of a disability or the need for accommodations in the educational or clinical settings of Harvard Medical School.

The Disability Coordinator works in close collaboration with other Harvard-based resources designed to evaluate and address architectural and programmatic access in each particular setting. Although a student's academic and accommodation histories are important, other factors are considered as well in determining what, if any, accommodations are appropriate now at HMS; the receipt of particular accommodations in a previous setting does not automatically indicate that identical accommodations will be provided here.

3. **Complete a "Request for Disabilities Services/Accommodation" form:** Along with submitting clinical documentation, the student will complete a Request for Disabilities Services/Accommodation form (the student will receive this form when he/she meet with the Student Disability Coordinator.) The Disability Coordinator will make an initial evaluation of the request with respect to the completeness of the clinical or other diagnostic documentation submitted. The Disability Coordinator's evaluation may include consultation with at least one clinical consultant in addition to a meeting with the student before final determination of services can be made. With the student's written permission, the Disability Coordinator may need to consult with the original evaluator when documentation guidelines have not been followed or information is otherwise unclear.

Sometimes a student may be asked to provide updated comprehensive information, if the condition is potentially changeable and/or previous documentation does not include sufficient relevant information. Last-minute submission of documentation may result in unavoidable delays in consideration of requested services. Because Master’s education may include a variety of settings – classroom to mentored research/capstone site – accommodations granted on admission may not be appropriate for all settings; the Disability Coordinator, in collaboration with a clinical consultant, may review with the student, as needed, accommodations for each class or setting as the student progresses through the medical school curriculum, to avoid compromising or altering fundamentally the essential components of a particular course or program.

4. **Provisional Interim Accommodations for students with a previous history of documentation with or without accommodations for LD and/or ADHD:**

Students with a previous history of neuropsychological documentation with or without a history of accommodations for LD and/or ADHD may seek review of their documentation by the Disability Coordinator's educational consultant for the purposes of assessing his/her need for provisional interim accommodations. In the event that the consultant feels the previous documentation requires amplification or is not sufficiently updated, the Disability Coordinator may request that the student undergo additional neuropsychological testing. The educational consultant may recommend to the Disability Coordinator provisional accommodations in the interim for the student, to be communicated to the appropriate faculty member, based on the previous documentation provided.
It is understood that provisional accommodations will be revised as necessary upon the educational consultant's review of the requested additional neuropsychological testing and that the student bears the responsibility to work with the educational consultant to provide the testing results in as timely a manner as possible. Provisional interim accommodations will be limited to a period of one term, if not shorter, pending the educational consultant's review of the new testing. Interim accommodations will be re-affirmed or modified, as appropriate for the HMS curriculum, based on the educational consultant's review.

5. **Implementation of Accommodations in Courses and Programs and Student's Responsibilities:**
   The Master's Disability Coordinator will communicate by letter the accommodation(s) determined by the Disability Coordinator's process of review to the appropriate course or Program Director before the start of the course/program. The student has the responsibility to anticipate the need for such letters in his/her various courses/programs and to plan with the Master’s Disability Coordinator the sequence of letters that will be needed for the courses planned for the year. The student is also responsible for ensuring that the letters have been received in a timely fashion by the course/Program Directors. If any problem arises in the receipt of such a letter by the course/Program Director, the student must promptly notify the HMS Disability Coordinator to ensure that the necessary steps are taken to guarantee that the paperwork is in place.

6. **Yearly review of Course/Program Accommodations with Disability Coordinator:**
   The student should review and renew this process each year with the Master’s Disability Coordinator to check for possible adjustments of accommodations in new training settings (e.g., from classrooms to other settings). In this yearly review, the Master’s Disability Coordinator may consult with at least one clinical consultant in addition to meeting with the student to assist in final determination of services, if changes are considered necessary.

For **nonacademic accommodations** (e.g., related to transportation, housing, or technology assistance), the Disability Coordinator will consult with the appropriate Harvard housing manager, the Director of Media Services, or other Harvard officials involved in facilitating the accommodation. The Disability Coordinator will then make and record a decision regarding the request.

For **academic accommodations** (e.g., related to curriculum modifications within a course or program), the student should first meet with his/her Program Director and subsequently with the Course Director(s) to discuss the accommodation request. The Disability Coordinator will also discuss the accommodation request with the student's Program Director and with the Course Director(s) and review the request with an educational consultant, as needed. The course and Program Directors, in consultation with the Disability Coordinator and with others as appropriate, will determine the appropriateness of the requested accommodation for the student and for the course and/or program. In the event that a determination is reached that the requested accommodation would result in lowering academic standards or altering the program substantially, the course and Program Directors, in consultation with the Disability Coordinator and with others as appropriate, will consider whether any feasible alternative accommodations exist that would take into account both the legitimate interests of the school and the student. The Disability Coordinator will record the course and Program Directors' decision.
The student will be notified of the decision and will sign and date the Request for Accommodation form to indicate his or her acceptance. The Coordinator will provide a copy of the completed form to the student and to the Harvard officials involved in the accommodation process. The original form will be filed in the student's disabilities file.

**Appeal Procedure**

A student has the right to appeal any accommodation decision by filing a written explanation and petition for reconsideration. The Disability Coordinator will first attempt to mediate with the student and faculty/staff member.

If the Disability Coordinator is unable to resolve the matter, she will present the student's petition to the Academic Progress and Review Board for the Master’s Programs (APRB), chaired by the Dean for Basic Science and Graduate Education. In adherence with confidentiality policies, the Disability Coordinator will obtain the student's written permission prior to distributing primary clinical documentation to members of the APRB, if relevant to the petition.

Members of the APRB will discuss the case and offer recommendation(s) for a solution. Within three school days following the APRB meeting, the Disability Coordinator will notify the student and faculty/staff member of the APRB’s recommendation(s).

If the APRB resolution is still unsatisfactory, the student may appeal in writing to:
Harvard University Disability Coordinator
Office of the Assistant to the President
Smith Campus Center, Room 935
Cambridge, MA 02138
617-495-1540

*The University Disability Coordinator's decision will be final.* In most circumstances, the University Coordinator will not overturn the decision of the ABP unless he or she is presented with new information regarding the request that has not been considered by the APRB.

Harvard Medical School expressly reserves the right to make changes to its written policies, rules, and regulations that are consistent with its legal obligations of nondiscrimination and reasonable accommodation. The above information is not intended, and should not be construed, to give rise to contractual rights and obligations.

**Guidelines for Documentation of Medical, Learning, Attentional, and Psychological Disabilities**

Before any accommodation can be granted, students must submit documentation as well as meet with the HMS Student Disability Coordinator. To ensure complete documentation, we suggest that students give a copy of relevant guidelines to clinicians for use in writing reports documenting the need for accommodations. Students are also advised to keep a copy of any documentation materials they give to the Disability Coordinator. In instances of multiple diagnoses, including combinations of medical, learning, attentional, and/or psychological disabilities, students and their clinical evaluators should
consult the appropriate companion guidelines to ensure adequate documentation for the accommodations requested.

**Documentation for Medical Disabilities**

The following guidelines for medical disabilities (including mobility, manual, hearing, and visual disabilities) and conditions resulting from temporary illnesses and injuries are provided to assist students who plan to submit clinical documentation to the Master’s Disability Coordinator. Please see separate guidelines for learning, attentional, and psychological disabilities:

- The clinician must be qualified to make the diagnosis in the area of specialization and may not be a member of the student's family.
- The evaluation is written on professional letterhead, is current, usually within 3 months, and contains the date of the last appointment with the student.
- The clinician indicates a claimed disability clearly as defined under the ADA.
- Documentation supports the claimed disability clearly with relevant medical and other history.
- The evaluation contains a description of current medications, treatments, and assistive devices and technologies with estimated effectiveness in ameliorating the impact of the disability (i.e., extent of effectiveness of corrective lenses, use of crutches, etc.) and history of medication side effects known to have affected the student.
- A description is included of the functional limitations resulting from the disability that addresses specifically a graduate educational setting and, if relevant, reference to allowable activities.
- The documentation clearly supports the direct link to and need for the requested accommodations.

**Documentation for Learning Disabilities (LD)**:

(*Please consult the Master’s Disability Coordinator in 001Gordon Hall for a more detailed version, including Appendix A: Recommendations for Students and Applicants Seeking a Qualified Professional and Appendix B: Tests for Assessing Adolescents and Adults with Learning Disabilities*)

The evaluation must be conducted by a qualified professional who:

- has comprehensive training and relevant experience with an adolescent and adult LD population;
- has competence in working with culturally and linguistically diverse populations; and
- is not a member of the student's family.

Documentation must be recent, which, in most cases, means that testing has been conducted within the past five years. Documentation should include:

- a summary of a diagnostic/clinical interview;
- assessment of the major domains of cognitive and academic functioning;
- a list of tests administered, including all standard scores (Appendix B of detailed version);
- expert interpretation of the results;
- a clear diagnosis and statement of disability;
- discussion of functional limitations and academic functioning levels; and
- recommendations.
The diagnostic/clinical interview summary listed above should include:

- a description of the presenting problem(s);
- a developmental history of language and speech acquisition and early motor skill development;
- relevant medical history, including the absence of a medical basis for the present symptoms;
- academic history, including areas of uneven academic achievement and results of prior standardized testing taken with or without accommodations;
- reports of unevenness in classroom performance and behavior;
- relevant family history, including primary language of the home and the student's current level of fluency of English;
- relevant psychosocial history;
- relevant employment history;
- a discussion of dual diagnosis, preexisting or coexisting behavioral, medical, neurological, and/or personality disorders, along with any history of medication use, past or current, that may affect the student's learning;
- a description of auxiliary aids, services, and accommodations used; and
- exploration of possible alternatives that may mimic a learning disability when, in fact, a disability is not present.

Neuropsychological or psycho-educational assessment must provide clear evidence that a specific LD does or does not exist. Objective evidence of substantial limitation to learning must be provided. Assessment must consist of a comprehensive, individualized, standardized, and adult-normed assessment battery. Any resulting diagnosis must be based upon a pattern of performance across the battery. A list of acceptable tests is included in Appendix B of the detailed version of these requirements, available from the HMS Disability Coordinator. Any factors influencing the validity of the testing must be described (e.g., whether the test taker withheld or took regular medications on the day of testing).

At a minimum, the domains to be addressed in a psycho-educational report must be the following:

- **aptitude/cognitive ability**: a valid intellectual assessment with all subtests and standard scores;
- **academic achievement**: a comprehensive academic achievement battery that assesses basic and higher order skills of reading, writing, verbal expression, and math as well as fluency (timed performance) in these academic areas;
- **cognitive and information processing** that includes memory, processing speed and cognitive fluency, attention, sensory-perceptual functioning, executive functioning, motor functioning, visual acuity, and possible need for prescription eye glasses;
- **informal measures**, including classroom tests, informal assessment procedures, and observations that may be integrated with information from formal assessment measures to help rule in or rule out the learning disability, to differentiate it from coexisting neurological and/or psychiatric disorders, or to support a recommendation for a specific accommodation;
- **error analysis** of specific errors in performance on relevant assessment measures and other informal areas with a narrative description, discussion, and interpretation of the kinds of errors made by the student; and
- **behavioral observations**, including signs of anxiety, fatigue, or motivational issues.
The documentation must include a specific learning disability diagnosis in the official nomenclature of the Diagnostic and Statistical Manual, IV (DSM-IV) and/or the ICD-10 and describe both the nature and severity of the learning disability. The evaluator must describe the impact the learning disability has on major life activities, including the significance of this impact on the student's learning.

A clinically interpretive summary must be provided that includes:

- evidence that the evaluator ruled out alternative explanations for academic problems, such as limited education exposure, poor motivation and/or study skills, emotional problems, attentional problems, and cultural/language differences;
- evidence of how patterns in cognitive ability, achievement, and information processing are used to determine the presence of a learning disability;
- evidence of the substantial limitation to learning presented by the learning disability and the degree to which the disability affects the student in the learning context for which accommodations are being requested;
- evidence of why specific accommodations are needed in this current educational setting and how the effects of the specific disability are mediated by the accommodation;
- an accommodation that is clearly identified (If an accommodation is not clearly identified in the diagnostic report, the Master’s Disability Coordinator or his/her designee reserves the right to seek clarification and/or additional information from the evaluator. The Master’s Disability Coordinator will make the final determination as to whether accommodations are warranted and can be provided for the student. If no prior accommodation(s) has been provided, the qualified professional and/or the student should include a detailed explanation of why no accommodations were used in the past and why an accommodation is needed at this time.);
- additional sources of documentation that can be used to corroborate the functional limitations and build a case for the requested accommodation(s). (Relevant information from these sources should be summarized by the evaluator in the current documentation and/or included as an attachment by the student.)

HMS will not release any part of the documentation without the student's informed consent or under compulsion of legal process.

**Documentation Guidelines for Attentional Disabilities (ADHD):**

1. The evaluation must be conducted by a qualified professional who:

   - has comprehensive training in the differential diagnosis of ADHD,
   - has direct experience with an adolescent or adult ADHD population, and
   - is not a member of the student's family.

2. Documentation must be recent, which, in most cases, means that testing has been conducted within the past three years.

3. A comprehensive assessment should include a diagnostic interview, neuropsychological and/or psycho-educational testing, and third party interviews when available.
Diagnostic interview should include:
- History of presenting attentional symptoms, including evidence of ongoing impulsive/hyperactive or inattentive behavior that has significantly impaired functioning over time;
- Developmental history;
- Family history of ADHD and other educational, learning, physical, or psychological difficulties deemed relevant by the examiner;
- Relevant medical and medication history, including the absence of a medical basis for the symptoms being evaluated;
- Relevant psychosocial history and any relevant interventions;
- A thorough academic history of elementary, secondary, and postsecondary education;
- Review of prior psycho-educational test reports to determine whether a pattern of strengths or weaknesses is supportive of attention or learning problems;
- Relevant employment history;
- Description of current functional limitations pertaining to an educational setting and that are presumably a direct result of problems with attention; and
- Relevant history of prior therapy.

Assessment must not only establish a diagnosis of ADHD, but also demonstrate the current impact of the ADHD on a student's ability to take tests under time pressure. In addition, neuropsychological or psycho-educational assessment is important in determining the current impact of the disorder on a student's ability to function in academically related settings.
- All data (selected test and subtest scores from measures of intellectual ability, memory functions tests, attention or tracking tests, continuous performance tests, checklists and/or surveys, clinical observations, etc.) must reflect logically a substantial limitation to learning for which the individual is requesting accommodation.

4. Documentation must include a specific diagnosis of ADHD based on the DSM-IV diagnostic criteria.

5. An interpretive summary must be provided that includes:

- Demonstration that the evaluator has ruled out alternative explanations for inattentiveness, impulsivity, and/or hyperactivity as a result of psychological or medical disorders or non-cognitive factors;
- Indication of how patterns of inattentiveness, impulsivity, and/or hyperactivity across the life span and across settings are used to determine the presence of ADHD;
- Indication of whether or not the student was evaluated while on medication and whether or not a positive response to the prescribed treatment occurred;
- Indication and discussion of the substantial limitation to learning presented by the ADHD and the degree to which the ADHD has an impact on the student in the learning context for which accommodations are being requested;
- Indication as to why specific accommodations are needed and how the effects of ADHD symptoms, as designated by the DSM-IV, are mediated by the accommodation(s).

**Documentation Guidelines for Psychological Disabilities:**

- The evaluation must be conducted by a qualified professional who:
o has comprehensive training and relevant experience in differential diagnosis in the full range of psychiatric disorders;
o has appropriate licensure/certification; and,
o is not a member of the student's family.

• Documentation must be current. Because of the changing nature of psychiatric disabilities, documentation must address the student's current level of functioning and the need for accommodations (e.g., resulting from observed changes in behavior and/or performance or from medication changes since previous assessment). If the diagnostic report is more than six months old, the student must also submit a letter from a qualified professional that provides an update of the diagnosis, a description of the student's current level of functioning during the preceding six months, and a rationale for the requested academic or residential accommodations.

• Comprehensive assessment is necessary to substantiate the diagnosis and must include data from historical information, diagnostic interview, and/or psychological assessment. Psycho-educational, neuropsychological, or behavioral assessments are often necessary to support the need for accommodations because of the potential for psychiatric disorders to interfere with cognitive performance. The evaluation should include:
  o History of presenting symptoms;
  o Duration and severity of the disorder;
  o Relevant developmental, historical, and familial data;
  o Relevant medical and medication history, including the student's current medication regimen and compliance, side effects (if relevant), and response to medication;
  o Description of current functional limitations in different settings, with the understanding that a psychiatric disability usually presents itself across a variety of other settings – in addition to the residential and academic domain – and that expression of the disability is often influenced by context-specific variables (e.g., school-based performance);
  o As relevant to the residential domain, a description of observed behaviors that are likely to have an impact on dormitory life as well as progression or stability of the impact of the condition over time;
  o As relevant to academic performance, a description of the expected progression or stability of the impact of the condition over time; and
  o As relevant to academic performance, information regarding kind of treatment and duration and consistency of the therapeutic relationship.

• Documentation must include a specific diagnosis based on the DSM-IV-TR or ICD-10 diagnostic criteria, and a specific diagnostic section in the report with a numerical and nominal diagnosis from DSM-IV-TR or ICD-10 should be included. Evaluators are encouraged to cite the specific objective measures used to help substantiate the diagnosis.

• Alternative diagnoses or explanations should be ruled out. The evaluator must also investigate, discuss, and rule out the possibility of other potential diagnoses involving neurological and/or medical conditions or substance abuse as well as educational, linguistic, sensorimotor, and cross-cultural factors that may result in symptoms mimicking the purported psychiatric disability.

• Rationale for the requested accommodations must be provided. The evaluator must describe the current impact of the diagnosed psychiatric disorder on a specific life activity as well as the degree of impact on the individual. A link must be established between the requested accommodations
and the functional limitations of the individual that are pertinent to the anticipated academic and residential settings. A diagnosis in and of itself does not automatically warrant approval of the requested accommodations.

- Multiple diagnoses may require a variety of accommodations beyond those typically associated with one diagnosis, and, therefore, the documentation must adhere to the Master’s Disability Coordinator's guidelines for other diagnoses.

10.03 Office for Human Research Administration

The Harvard Medical School Office of Human Research Administration is responsible for the approval and oversight of human research conducted at HMS. All such research must receive approval from the appropriate Institutional Review Board (IRB) prior to the start of the study. Details about policy and procedures can be found at http://hms.harvard.edu/departments/office-human-research-administration.

Determining if a Master's Student Needs HMS IRB Approval

1. If the student is also an employed fellow at an HMS-affiliated hospital and is conducting his Master’s research as part of his fellowship, then usually only hospital IRB approval is needed. In those cases where HMS is the recipient of a grant or other award which funds the research, HMS approval would be needed.

2. If the student is not an employed fellow at an HMS-affiliated hospital but is conducting his Master’s research at an affiliated hospital, he needs to contact the Office of Human Research Administration (Grace Bullock) to determine what type of action may be taken by the HMS/SPH IRB. Possible actions include: a determination of whether or not the student is actually engaged in human subject research; a full review by the HMS/SPH IRB; or a ceding to the hospital’s IRB.

3. If the student is not an employed fellow at an HMS-affiliated hospital and is conducting his Master’s research at an international site, he must contact the Office of Human Research Administration to obtain HMS/SPH IRB approval even if he already has approval from the international site. (Harvard will not cede to an international site’s IRB.)

4. If the student is not an employed fellow at an HMS-affiliated hospital and is conducting his Master’s research at HMS (in a Quad department), he would need HMS/SPH IRB approval for any human subject research or he might just need to be added to an already approved study.

5. If in doubt, contact Grace Bullock in OHRA at 617-432-3071 or gbullock@hsph.harvard.edu.

See also: http://www.hsph.harvard.edu/ohra/formsinstructions/iaas-and-iias/

Important links

Information and forms for submitting IRB applications for research are available at http://cuhs.harvard.edu/.

**Guidelines for Approval of Research Studies**

**To apply for IRB approval of research**

Master’s students must receive approval from their program for their proposed mentored research or capstone projects before applying for IRB approval. Program staff and research mentors are available to assist in the application process.

To begin the application for IRB approval, go to [irb.harvard.edu](http://irb.harvard.edu) to access ESTR, the Electronic Submission, Tracking, and Reporting System, and use your Harvard ID and password to sign on to the system. Click on “create new study,” and you will see a blank “SmartForm” that includes a series of questions related to your study (Study Title, Personnel, etc.). Depending on your answers, the SmartForm will direct you to fill out additional forms or answer more detailed questions relevant to your study. A research protocol template will also be provided for you to describe the study design, methods, recruitment, and consent process. While you are working on your research protocol document, you can save it on your computer or flash drive, and upload it to your ESTR account when it is completed. Other study documents (such as consent forms, survey instruments, and recruitment material) must also be uploaded to ESTR. When your study documents are ready to go, you will click “submit” and the IRB will begin the intake process.

**Guidelines for Research with Students as Participants**

Students may participate in any study for which they are eligible; however, in order to prevent any coercion (or perception of coercion) or undue pressure for students to participate, investigators should not specifically recruit students who work directly or indirectly for them, students who work with or for them, or students for whom investigators have any, even indirect, educational oversight, such as grading or assessment.

Participation in a research study may never be a condition of employment, insurance, grades, promotion, or any other benefits or bonuses. The Office of Human Research Administration is particularly mindful of situations that may put undue pressure on students to participate in research projects, and thus recommends that investigators refrain from directly soliciting students as participants. Students with questions or concerns related to participation in a research study should contact the Harvard Office of Human Research Administration. Contact information can be found at [http://hms.harvard.edu/departments/office-human-research-administration/contacts-location](http://hms.harvard.edu/departments/office-human-research-administration/contacts-location).

**10.04 Standing Committee on Animals**

The Harvard Medical School Standing Committee on Animals is responsible for the approval and oversight of animal research conducted at HMS. All such research must receive approval from this committee prior to the start of the study. Details about policies and procedures can be found at [http://hms.harvard.edu/departments/hma-standi ng-committee-animals](http://hms.harvard.edu/departments/hma-standing-committee-animals).
10.05 The Ombuds Office

The Ombuds Office, established in 1991, provides students with a highly confidential, independent and informal forum in which to help them to clarify their concerns, identify their goals, and consider all of their options in managing or resolving their concerns. The Ombudsperson serves students (as well as faculty, staff and trainees) at Harvard Medical School, Harvard School of Dental Medicine, and Harvard School of Public Health. The Ombudsperson does not serve as an advocate for any party to a dispute. However, an Ombudsperson does advocate for fair treatment and processes. Some typical concerns brought to the Ombuds Office include work, learning environment and performance, fear of retaliation, professional misconduct, authorship, sexual harassment, and discrimination. Any issue may be brought to the Ombudsperson.

The Ombuds Office seeks to enhance the ability of all students to deal more effectively with challenging situations on their own. If assistance is needed beyond individual coaching, further information can be gathered on behalf of the student, referrals can be made to those with expertise in a specific area or proper authorities at the school or affiliated institution can be contacted. When appropriate, the Ombudsperson can provide shuttle diplomacy or informal mediation services to help find a satisfactory solution. The student decides which course of action, if any, is taken and that action is tailored to fit each situation.

For more information:

**Ombuds Office**

**Melissa Brodrick, HMS/HSDM/HSPH Ombudsperson**

164 Longwood Avenue, First Floor  
617-432-4040 (Ombuds)  
617-432-4041 (Office)  
617-432-0586 (confidential fax)  
E-mail: melissa_brodrick@hms.harvard.edu  
Web site: www.hms.harvard.edu/ombuds/

**Office Hours:**

Monday through Friday, 8 a.m. - 5 p.m.

Call to schedule an appointment

10.06 Harvard University Events and Information Center

The Harvard University Events and Information Center welcomes visitors and community members to Harvard and also provides services for the Harvard community and the general public. The Center's staff is happy to answer general questions and to provide maps, illustrated booklets, suggested walking tours, the Harvard Gazette (http://news.harvard.edu/gazette/), and background information on University events. In addition to these services, the Center also offers guided historical tours.
Members of the Crimson Key Society, a student organization, conduct walking tours during the academic year. In summer, Harvard College students who work at the Information Center conduct the tours. Historical tours are given Monday through Friday at 10:00 a.m. and 2:00 p.m. and Saturday at 2:00 p.m. during the academic year. During the summer months, the tour times are expanded to Monday through Saturday at 10:00 a.m., 11:15 a.m., 2:00 p.m., and 3:15 p.m. No tours are conducted on holidays. Tours are conducted free of charge; those wishing to participate should go to the Events and Information Center shortly before a tour is scheduled to begin. Reservations may be made for groups of 20 or more by calling 617-495-1573.

Schedules of Harvard events, which are listed in the calendar section of the Harvard Gazette, also appear on a video display at the Center and on the Harvard News office Website (www.news.harvard.edu) or can be obtained by dropping by the Events and Information Center. A light-up locator map and a computer station to access Harvard information are always available outside the center when the arcade is open.

**Harvard University Events and Information Center**
Smith Campus Center Arcade
1350 Massachusetts Avenue
Cambridge, MA
http://www.fas.harvard.edu
617-495-1573
icenter@camail1.harvard.edu

**10.07 Vanderbilt Hall Athletic Facility**

The Athletic Facility in Vanderbilt Hall is available as a complimentary privilege to all Harvard University students. Students must have a valid Harvard Student Photo ID card. For more information, visit the [Vanderbilt Hall Athletic Facility](http://www.fas.harvard.edu).

**10.08 Harvard International Office**

The Harvard International Office (HIO) ([http://www.hio.harvard.edu/](http://www.hio.harvard.edu/)) provides programs and services for international students and scholars at Harvard as well as their families. The HIO is part of the University’s Central Administration and offers services to international students and scholars at Harvard College, the graduate and professional schools, as well as the numerous research centers and affiliated teaching hospitals, to minimize the difficulties they may experience both upon arrival and later during their stay at Harvard.

Mission: HIO provides information on a wide range of topics, including immigration issues ([work permits, travel](http://www.fas.harvard.edu)), financial questions, social and cultural differences, and [resources at Harvard](http://www.fas.harvard.edu) and in the community. International students are given the opportunity to participate in [Harvard's International Student Host Program](http://www.fas.harvard.edu), which connects them with Americans living in the Cambridge and Boston areas.

The office also acts as a liaison between Harvard and various public and private agencies in matters affecting the University's international students and scholars. [All newly admitted international students are required to check in with the International Office before registering in their schools and should bring their passports and visa documents or other evidence of their immigration status.](http://www.fas.harvard.edu)
international students are encouraged to visit the office in order to take advantage of its programs and services.

**Harvard International Office**  
1350 Massachusetts Avenue  
Richard A. and Susan F. Smith Campus Center, 864  
Cambridge, MA 02138

Phone: 617-495-2789  
Fax number: 617-495-4088  
Website: [www.hio.harvard.edu](http://www.hio.harvard.edu)

**Regular Office Hours:**  
Monday to Friday, 9:00 am to 3:00 pm (except for holidays).  
**HBS and Longwood Medical Area (LMA)**  
Office Hours: Some HIO advisors hold office hours at certain schools. For off-site office hour schedules, please go to [http://www.hio.harvard.edu/office-hours](http://www.hio.harvard.edu/office-hours).

**10.09 Work/Life and Family Resources**

**Longwood Office of Work and Family**

The Office of Work and Family provides information, resources, referrals, educational programs and support to those combining work lives with family needs. The Office serves the faculty, staff, postdocs and students of Harvard Medical School, Harvard School of Dental Medicine and Harvard School of Public Health as an expression of the community’s commitment to helping individuals balance their work lives with the important job of caring for their children, aging parents and their own personal lives.

- **Childcare information:** [http://hms.harvard.edu/humanresources/worklife-harvard-longwood/child-care-information](http://hms.harvard.edu/humanresources/worklife-harvard-longwood/child-care-information)
- **Mothers’ rooms:** [http://hms.harvard.edu/humanresources/worklife-harvard-longwood/mothers-rooms](http://hms.harvard.edu/humanresources/worklife-harvard-longwood/mothers-rooms)
- **General Work/Life Information:** [http://hms.harvard.edu/humanresources/worklife-harvard-longwood](http://hms.harvard.edu/humanresources/worklife-harvard-longwood)

**10.10 Religious Activities**

The United Ministry at Harvard is the umbrella organization of 36 chaplains representing 25 of the world’s religious (and one nonreligious) traditions, united in their commitment to serving Harvard’s diverse student communities. Members of the Harvard community are encouraged to contact the chaplains in The United Ministry at Harvard, who are available to meet and talk about spiritual concerns and ethical and personal matters. Please visit the Website ([http://chaplains.harvard.edu/](http://chaplains.harvard.edu/)) for complete up-to-date information, news and events, a full description of groups, and worship services.

**The United Ministry at Harvard**  
The Memorial Church  
Ground Floor
10.11 Security and Police

The primary responsibility of Harvard University Police is to respond to criminal emergencies as well as suspicious activity 24 hours a day.

Photo ID Badges: Photo ID badges are necessary to gain entrance into the Harvard Longwood Campus buildings. Photo ID pictures are taken daily from 10 a.m.–2 p.m. in the ID Office located in the Kresge building, Harvard Chan School, Room 103. Written authorization is required from the Registrar before an ID will be issued to students. Photo ID badges, which are to be displayed visibly at all times while students, faculty, and staff are on Harvard property, entitle you to free shuttle bus rides to and from Cambridge, as well as the free taxi escort service. Call 617-432-0359 if you have any questions.

Walking Escort Service: Call 617-432-1379 for an escort if you have to walk to your car, to an MBTA stop, or between buildings. Because a potential delay of 15-minutes in responding may occur, please call ahead. This service is for your safety and provided for everyone on Campus 24 hours a day.

Taxi Escort Service: Taxi Escort Service for some predetermined situations is available. For information about this service, call 617-432-1379 or check at the front desk of Vanderbilt Hall. You will need to present your valid Harvard ID card to use this service.

24-Hour Closed-Circuit TV-Monitored Entrances: Security coverage is active at all building access points including: Gordon Hall, Goldenson/Armenise, C/E link (between Building C and TMEC), Countway, TMEC, HSPH, Vanderbilt Hall, and the Alpert Research Facility, Longwood entrance. Although security officer coverage is limited to Monday-Friday, 8 a.m. to 4 p.m., constant camera surveillance continues at all hours at the access points. To gain entrance to any HMS building between 4 p.m. and 8 a.m., you must slide your Harvard photo ID (or affiliated ID) through the card reader. Visitors must have verification or a visitor pass.

Parking Lot Surveillance/Monitoring Emergency Telephone Locations: The parking areas are routinely under surveillance by the Harvard Police after hours, 5 p.m.–7 a.m., and monitored during the business hours (7 a.m.–5 p.m.) of the Medical School. Illegally parked cars will be towed Monday through Friday, 7 a.m.–5 p.m. All parking areas have nearby emergency telephones.

Secured bicycle cages/racks: Bicycle racks are located in the front of the Medical Education Center (TMEC), on both sides of Gordon Hall, in the courtyard between the TMEC and Building C, and on the walkway at the rear of the Countway Library. A secure bicycle cage is located at the front of Countway Library. This cage has closed-circuit TV cameras and is controlled by the card access system. You may gain access to the bike cage by going to the Parking Office at 180 Longwood Ave., Monday through Friday, 7 a.m.–5 p.m., to have your Harvard ID programmed. Although the cage and racks are patrolled daily by the Harvard Police, all bicycles should be locked as well with a high-quality bicycle lock.
Monthly reported crimes: This bulletin is a listing of all crimes reported to the Harvard Police. The purpose of the report is to create awareness among faculty, staff, and students, informing them of criminal activity. Several hints are included in the reported crimes bulletin, such as: 1) lock up valuables in your desk or locker; 2) do not walk alone after dark (call 617-432-1379, walking escort); and 3) do not leave your office or dorm room untended or open even for a minute.

REPORT ALL SUSPICIOUS ACTIVITY TO THE HARVARD POLICE, 617-432-1212.

Lock-outs: Although Security will respond to lock-outs, such requests are not considered a top priority. If you are locked out, call 617-432-1379. You must show your photo ID to the Security Officer who lets you in.

10.12 Transportation Services

HMS Transportation Guide

For directions to clinical sites and other Harvard affiliates, please refer to the HMS Transportation Information site. See Section 7.03, Transportation Policy.

HMS Parking Office

The Parking Office, located at 180 Longwood Avenue, maintains and operates parking facilities for faculty, staff, students, and visitors to the Harvard Longwood Campus. These resources are extremely limited and are managed through a permitting system that is designed to optimize their use in a safe, efficient, and equitable manner. For more information please visit http://hms.harvard.edu/departments/campus-planning-and-facilities/campus-operations/commuter-services-and-parking.

Parking for Students

Parking spaces for students at Harvard Medical School are limited. Because more students sign up for parking than slots are available, a committee composed of the Executive Board of the HMS/HSDM Student Council has determined a fair process for allocating these slots:

1. Priority is given to third, fourth, and fifth-year medical and dental students because of seniority and their need to travel to and from the Harvard Longwood Campus for clinical rotations.
2. Further priority is then given to third and fourth-year students who live in Vanderbilt Hall, because students who live in off-campus apartments have at least some chance of parking at their place of residence.
3. Students who have been allocated a parking slot for a given academic year will have the option to renew that slot for the following academic year and annually thereafter until the time of graduation.
4. Slots that are not renewed or that open when a student graduates will be allotted to students meeting the above criteria who are on the waiting list for a parking space.
The Parking Office maintains the waiting list. The Parking Office can be reached at 617-432-1111. Students will be charged the full monthly rate for parking. Students who do not receive a slot at the Harvard Longwood Campus but require a space to house a car may apply for a slot at the Soldiers Field Park Parking Garage in Allston, on the campus of the Harvard Business School. This Garage is within walking distance of the Longwood Area Shuttle Bus stop at Harvard Square. Contact the Harvard University Parking Office at 617-496-7827.

**LMA Harvard Medical School Shuttle (M2)**

MASCO manages the Harvard Medical School shuttle, which runs between the Longwood Medical Area (LMA) and Harvard University in Cambridge. This service is free to all students, faculty, and staff; you must show your Harvard ID card to access this service. For others, tickets for the Harvard M2 shuttle can be bought at the HMS Parking Office or at the cashier’s office at Smith Campus Center in Cambridge. The M2 schedule is available at the parking office, the Information Office at Smith Campus Center Arcade, and the security desk at Vanderbilt Hall. Please go to [https://www.masco.org/lma-shuttles/routes](https://www.masco.org/lma-shuttles/routes) for more information.

**Zip Car**

Harvard Medical School has a limited number of hybrid Zipcars available in the Palace Parking lot between 180 and 164 Longwood Avenue. Harvard faculty, staff, students, post-docs and others working in the Longwood area are eligible to receive a discount on Zipcar memberships by signing up at [http://www.zipcar.com/crimson/](http://www.zipcar.com/crimson/).

**10.13 Harvard Longwood Campus Map**

Click on the link below to connect to the HMS Transportation Guide ([http://mycourses.med.harvard.edu/ResCourses/CampusWide/HMSTG/hmstg.htm](http://mycourses.med.harvard.edu/ResCourses/CampusWide/HMSTG/hmstg.htm)), where you will find an interactive Longwood Medical Area (LMA) Map or navigate to the Getting to HMS section of our website. Other maps are available at: [http://hms.harvard.edu/contact-us/maps-and-directions/longwood-campus-maps](http://hms.harvard.edu/contact-us/maps-and-directions/longwood-campus-maps)

**10.14 Voter Registration**

Massachusetts official mail-in voter registration forms are available in the HMS Registrar’s Office, Gordon Hall, Room 213. These forms are available for any Massachusetts student who wants to register to vote. For students from other states who want to vote in a state other than Massachusetts, the Federal mail-in affidavit or a mail-in form supplied by that state must be used.

**10.15 Veterans’ Benefits**

Any student eligible for veterans’ benefits should speak with the Veterans’ Affairs office to determine eligibility under current regulations (1-888-442-4551). Harvard Veterans’ Affairs information is available in the Student Receivables Office in Cambridge, Smith Campus Center 953, 617-495-1992 or [https://sfsportal.harvard.edu/admin/sro/index.shtml](https://sfsportal.harvard.edu/admin/sro/index.shtml).
10.16 Harvard University Title IX Coordinators

http://diversity.harvard.edu/pages/title-ix-sexual-harassment

Title IX & Gender Equity

University Title IX Policy and Procedure: Harvard has implemented a University-wide Title IX policy and associated procedures to prevent sexual harassment – including sexual violence – related to sex, sexual orientation or gender identity.

Master’s students may contact one of the designated Title IX coordinators for HMS depending on the nature of the situation.

10.17 Harvard University Office of Sexual Assault Prevention and Response (OSAPR)

The Harvard University Office of Sexual Assault Prevention and Response promotes the compassionate and just treatment of student survivors, their friends, and significant others. It fosters collaborative relationships between campus and community systems, and affects attitudinal and behavioral changes on campus as we work toward the elimination of sexual violence against all people. For more information, click here.