2025/2026 CATALOG

KAISER PERMANENTE BERNARD J. TYSON SCHOOL OF MEDICINE













Kaiser Permanente Bernard J. Tyson School of Medicine

98 S. Los Robles Avenue Pasadena, CA 91101

Telephone: 1-888-576-3348 Website: medschool.kp.org

Conditions of Accuracy

Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) reserves the right, through its established procedures, to modify the requirements for admission and graduation and to change other rules, regulations, and provisions, including those stated in this catalog and other publications.

The information contained in this catalog applies to the 2025-2026 academic year:

Phase 1, Year 1 (July 28, 2025 – June 26, 2026)

Phase 2, Year 2 (August 11, 2025 – August 7, 2026)

Phase 3, Year 3 (September 15, 2025 – June 19, 2026)

Phase 3, Year 4 (June 23, 2025 – May 8, 2026)

The Doctor of Medicine (MD) program at the Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) prepares students for the following job classifications as defined by the following <u>United States Department of Labor's Standard Occupational Classification codes</u>: 29-1210 Physicians: 29-1211, 29-1212, 29-1213, 29-1214, 29-1215, 29-1216, 29-1217, 29-1218, 29-1221, 29-1222, 29-1223, 29-1224, 29-1229, 29-1240 Surgeons: 29-1241, 29-1242, 29-1243, 29-1249.

Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) is also required, per section 94909(a)(12) of the California Education Code, to disclose that it does not have a pending petition in bankruptcy, is not operating as a debtor in possession, nor has it filed a petition within the preceding five years. The school has not had a petition of bankruptcy filed against it within the preceding five years, which resulted in reorganization under Chapter 11 of the United States Bankruptcy Code (11 U.S.C. § 1101).

Contents

School of Medicine Calendar 2025-2026	10
Class of 2029 (First-Year Students)	10
Class of 2028 (Second-Year Students)	11
Class of 2027 (Third-Year Students)	12
Class of 2026 (Fourth-Year Students)	13
Mission, Vision, and Values	14
Mission	14
Vision	14
Values	14
Collaboration	14
Equity	14
Excellence	14
Innovation	14
Service	14
Trustworthiness	14
Our Context	14
Background and History	15
History of Kaiser Permanente	15
History of Kaiser Permanente Bernard J. Tyson School of Medicine	16
State Authorization and Accreditation	18
California Bureau for Private Postsecondary Education	18
Office of Student Assistance and Relief	18
Complaints	18
Institutional Accreditation Status of the WASC Senior College and University	
Commission (WSCUC)	
Liaison Committee on Medical Education (LCME)	
Instructional Facilities	
Primary Campus	
Library	
Simulation Center and Clinical Skills/Standardized Patient Area	
Anatomy Resource Center (ARC)	21

Core Clinical Training Sites	22
Longitudinal Integrated Clerkships	22
Other Clinical Experiences	23
Security, Student Safety, and Disaster Preparedness	24
Disaster Preparedness Training	24
Emergency Notification System	24
Security Notices	24
General Policies	25
Compliance	25
Internal Reporting of Ethics and Compliance Concerns	25
Non-Retaliation	25
Notifications Regarding Breaches of Protected Health Information	25
Information Technology	25
Acceptable Use	25
Computer Viruses and Malware	25
Electronic Asset Usage	26
Information Security Governance and Organization	26
Mobile Device Access to Campus Networks	26
User Access Management	26
Learning Environment	26
Academic Freedom	26
Equity, Inclusion, and Diversity	27
Non-Discrimination, Harassment-Free Environment, and Non-Retaliation	27
Positive Learning Environment and Student Mistreatment	27
Prohibition of Sexual Misconduct, Sex Discrimination, Sexual Harassment, and Retaliation	27
Prohibition of Firearms	
Restricted Relationships	
Service Animals	
Smoke and Tobacco-Free Campus	
Student Code of Conduct	
Student Grievances	
Threats and Violence in the Workplace: Prevention and Management	

Student Services	30
Office of Student Affairs	30
Academic Support and Advising	30
Career Advising and Development	31
Disability Access	31
Inclusion and Well-Being	32
Immunization Requirements	32
Housing Resources	33
Learning Communities	33
Learning Environment	33
Rideshare Programs	34
Student Council	34
Student Health and Disability Insurance	34
Student Organizations	35
Student Privacy Rights	35
Student Psychological Services (SPS)	39
Student Affairs Policies	40
Academic Honesty	40
Add/Drop Policy	40
Attendance and Excused Absence	40
Bloodborne Pathogen, Body Fluid, or Environmental Hazard Exposure	40
Disability Support Services	41
Drug Abuse and Alcohol Prevention	41
Drug Testing and Prohibited Drug and Alcohol Use	41
Enrollment Agreement	41
Leave of Absence	41
LIC and Service-Learning Site Assignment	41
Missing Student Notification	41
Standards of Appearance in Clinical Settings	42
Student Access to Healthcare Services	42
Student Access to Medical Student Educational Records	42
Student ID Badges	42

Student Lactation Support	42
Student Social Media	42
Student Withdrawals	42
Tuition Refund	42
Tuition, Fees, and Financial Aid	43
Tuition Waiver	43
Estimated Cost of Attendance, Fall 2025 to Spring 2029	43
Equipment and Technology Requirements	43
Estimated Total Tuition and Fees for Degree Completion	43
Required Licensing Examinations	44
Student Tuition Recovery Fund	45
Refund Policy	46
Student's Right to Cancel	46
Cancellation Procedure	46
Withdrawal from the Program	46
Financing Your Education	48
Goal	48
Federal Financial Aid (Title IV) Status	48
Financial Aid Programs	48
Student Aid Index (SAI)	49
Financial Aid Packaging	49
Disbursement of Financial Aid	50
Satisfactory Academic Progress (SAP)	50
Return of Financial Aid	51
Deferment of Student Loans	52
Student Financial Services	53
Institutional Grant Aid, Scholarship, or Private Loans Funds	53
Direct Deposit	53
Doctor of Medicine (MD)	54
The Degree	54
Other Degrees	54
MD/PhD Program	54

	Master's Programs	. 55
	Transferability of Credits	. 55
G	raduate Medical Education	. 55
Li	censure Requirements	. 56
Ε	ducational Program Outcomes	. 56
	Domain: Patient Care (PC)	. 56
	Domain: Life-Long Learning (LLL)	. 57
	Domain: Systems-based Practice (SBP)	. 57
	Domain: Population and Community Health (PCH)	. 58
	Domain: Interprofessional Collaboration and Teamwork (IPC)	. 58
	Domain: Interpersonal and Communication Skills (ICS)	. 58
	Domain: Professionalism (PR)	. 59
	Domain: Medical Knowledge (MK)	. 59
Ρ	rofessional Attributes	. 60
Ą	dmissions	. 61
	Technical Standards	. 61
	Equal Access to the School of Medicine's Educational Program	. 62
	Academic Requirements for Admission	. 63
	Admissions Process	. 64
	Admissions Application	. 64
	Additional Requirements for Admission	. 66
	International Students	. 66
	Transfer Students	. 67
	The Offer of Admission	. 67
	Accepted Student Registration Deposit	. 67
	Delayed Matriculation	. 67
	Timetable for Admission	. 67
R	egistration	. 68
	Enrollment Agreement	. 68
	Notice Concerning Transferability of Credits and Credentials Earned at Our Institution	. 68
	Transfer Credit	. 68
	Credit Hour Policy	. 68

	Full-Time Enrollment Status	. 68
	Time Frame/Pace of Completion	. 69
	Student-Initiated Changes in Enrollment Status	. 69
R	etention of Student Records	. 72
С	urriculum Policies	. 74
	Academic Honesty	. 74
	Academic Workload and Duty Hours	. 74
	Clinical Supervision	. 74
	Credit Hours	. 75
	Electives	. 75
	Formative Assessment and Feedback	. 75
	Narrative Assessment	. 75
	Non-Involvement of Providers of Student Health Services in Assessment and Promotion	. 75
	Recording of Educational Sessions and Events	. 75
	Satisfactory Academic Progress	. 75
	Single Standard for Promotion and Graduation	. 76
	Student Challenge of Assessment Data and Grades	. 76
	Student Corrective Action and Due Process	. 76
	Technical Standards	. 76
	Timely Submission of Grades	. 76
	Transfer Credit	. 76
	Transfer Students	. 76
	Use of Library and Electronic Learning Resources	. 76
Α	ssessment and Grading	. 78
	Assessment Methods	. 78
	Examinations for Remediation or Conditional Pass Grades	. 80
	Course Grades	. 81
	Administrative Grades	. 82
	Grade Reports	. 83
	Grade Changes	. 83
	Final Grade and Summary Narrative Comment Appeal Process	. 83
	Medical Student Performance Evaluation (MPSE) Generation and Appeal Policy	. 85

Promotional Decisions	86
Interruptions of and Non-Linear Progression in the Curriculum	93
Graduation Requirements	93
Requirements for Certification for the National Residency Match Program	94
Licensing Examinations	95
USMLE Step 1	95
USMLE Step 2 (CK)	95
MD Curriculum, Students Entering in Fall 2025	96
Required Courses, Phase 1, Year 1	96
Required Courses, Phase 2, Year 2	97
Required Courses, Phase 3	98
Required Credit Hours for the MD Degree	99
Required Credit Hours for the MD/PhD Degree	99
MD Curriculum, Students Entering in Fall 2024	100
Required Courses, Phase 1, Year 1	100
Required Courses, Phase 2, Year 2	101
Required Courses, Phase 3	102
Required Credit Hours for the MD Degree	103
Required Credit Hours for the MD/PhD Degree	103
MD Curriculum, Students Entering in Fall 2023	104
Required Courses, Phase 1, Year 1	104
Required Courses, Phase 2, Year 2	105
Required Courses, Phase 3	106
Required Credit Hours for the MD Degree	107
Required Credit Hours for the MD/PhD Degree	107
MD Curriculum, Students Entering in Fall 2022	108
Required Courses, Phase 1, Year 1	108
Required Courses, Phase 2, Year 2	109
Required Courses, Phase 3	110
Required Credit Hours for the MD Degree	111
Required Credit Hours for the MD/PhD Degree	111
MD Curriculum, Students Entering in Fall 2021	112

Required Courses, Phase 1, Year 1	112
Required Courses, Phase 2, Year 2	113
Required Courses, Phase 3	114
Required Credit Hours for the MD Degree	115
Required Credit Hours for the MD/PhD Degree	115
Course Descriptions	116
Phase 1, Year 1	116
Phase 2, Year 2	117
Phase 3, Years 3 and 4	121
Integrated Sciences	121
REACH	121
Advanced Clinical Selectives (FM/IM)	122
Advanced Clinical Selectives (Student's Choice)	122
Community Medicine Rotations	129
Critical Care Selectives	131
Neurology Rotation (Two-Week Required)	133
Clinical Science Electives	133
KPSOM-Affiliated Clinical Science Electives	158
Health System Sciences Selectives	165
General Electives	176
Research and Scholarship	177
Board of Directors	178
Directors	178
Administration	180
Faculty	181
Biomedical Science	181
Clinical Science	182
Health Systems Science	255

School of Medicine Calendar 2025-2026

Class of 2029 (First-Year Students)

Fall 2025 Semester (July 28, 2025 – December 19, 2025)

July 27, 2025 Incoming student welcome event

July 28, 2025 Fall semester begins

August 4, 2025 Enrollment agreement cancellation deadline

August 25, 2025 REACH Monday

September 1, 2025 Labor Day holiday (no classes)

September 12, 2025 White Coat Ceremony

September 15, 2025 Interprofessional Collaboration (IPC) Orientation

September 29, 2025 IPC Session 1
October 6-10, 2025 REACH Week 1
November 3, 2025 REACH Monday

November 17, 2025 IPC Session 2

November 26-28, 2025 Fall break (no classes)
December 8-12, 2025 Assessment Week
December 15-19, 2025 REACH Week 2

December 19, 2025 Fall semester ends

December 22, 2025 – January 2, 2026 Winter Break (no classes)

Spring 2026 Semester (January 5, 2026 – June 26, 2026)

January 5, 2026 Spring semester begins

January 19, 2026 Martin Luther King Day (no classes)

January 26, 2026 REACH Monday
February 23, 2026 IPC Session 3
March 2-6, 2026 REACH Week 3
March 30, 2026 IPC Session 4

April 6, 2026 REACH Monday

April 20-24, 2026 Spring break (no classes)

May 4, 2026 REACH Monday

May 25, 2026 Memorial Day (no classes)
June 15-19, 2026 Assessment Week

June 22-26, 2026 REACH Week 4

June 26, 2026 Spring semester ends

June 29, 2026 – August 7, 2026 Summer Break (no classes)

Class of 2028 (Second-Year Students)

Fall 2025 Semester (August 11, 2025 – February 13, 2026)

August 11, 2025 Fall semester begins
September 1, 2025 Labor Day (no classes)
September 8-12, 2025 Inpatient Immersion Week 1

September 15, 2025 REACH Monday

October 13-17, 2025 Inpatient Immersion Week 2

October 20-24, 2025 REACH Week 1
October 27, 2025 IPC Session 5
November 17, 2025 REACH Monday

November 26-28, 2025 Fall break (no classes)

December 15-19, 2025 Inpatient Immersion Week 3

December 22, 2025 – January 2, 2026 Winter break (no classes)

January 19, 2026 Martin Luther King Jr. Day (no classes)

February 2, 2026 IPC Session 6 (@WesternU)

February 9-13, 2026 Assessment Week February 13, 2026 Fall semester ends

Spring 2026 Semester (February 16, 2026 – August 7, 2026)

February 16, 2026 Spring semester begins February 16-20, 2026 REACH Week 2

March 9, 2026 IPC Session 7 (includes Assessment)

March 16-20, 2026 Inpatient Immersion Week 4
March 30, 2026 REACH Monday

April 20-24, 2026 Spring Break (no classes)

May 18-22, 2026 REACH Week 3

May 25, 2026 Memorial Day (no classes)
June 22-26, 2026 Inpatient Immersion Week 5

July 3, 2026 Independence Day Observed (no classes)

July 6, 2026REACH MondayJuly 27-31, 2026Assessment WeekAugust 3-7, 2026REACH Week 4

August 7, 2026 Spring semester ends

Class of 2027 (Third-Year Students)

Students will follow the holiday schedule of their clinical site if they are on a clinical selective or elective during a federal holiday.

Fall 2025 Semester (September 15, 2025 – February 15, 2026)

September 15, 2025

September 15, 2025 – October 10, 2025

October 13, 2025 – November 9, 2025

November 10-14, 2025

November 17-21, 2025

November 24, 2025 – December 21, 2025

December 22, 2025 - January 2, 2026

December 31, 2025

January 5-9, 2026

January 12-16, 2026

January 19, 2026 – February 15, 2026

February 15, 2026

Fall semester begins

Advanced Clinical Knowledge Training (ACKT)

Block 1.0

Integrated Sciences Week 1

REACH Week 1

Block 2.0

Winter Break (no classes)
USMLE Step 1 Deadline

Integrated Sciences Week 2

REACH Week 2

Block 3.0

Fall semester ends

Spring 2026 Semester (February 16, 2026 – June 21, 2026)

February 16, 2026

February 16, 2026 - March 15, 2026

March 16-20, 2026

March 23-27, 2026

March 30, 2026 - April 26, 2026

March 31, 2026

April 27, 2026 – May 24, 2026

May 25, 2026 – June 21, 2026

June 21, 2026

Spring semester begins

Block 4.0

IS Week 3

REACH Week 3

Block 5.0

USMLE Step 2CK Deadline

Block 6.0

Block 7.0

Spring semester ends

Class of 2026 (Fourth-Year Students)

Students will follow the holiday schedule of their clinical site if they are on a clinical selective or elective during a federal holiday.

Fall 2025 Semester (June 23, 2025 - November 23, 2025)

June 23, 2025 Fall semester begins
June 23, 2025 – July 20, 2025 Block 8.0
July 21, 2025 – August 17, 2025 Block 9.0

July 21, 2025 – August 17, 2025 Block 9.0

August 18, 2025 – September 14, 2025 Block 10.0

September 15, 2025 – October 12, 2025 Block 11.0

October 13-17, 2025 REACH Week 1

October 20-24, 2025 IS Week 1
October 27, 2025 – November 23, 2025 Block 12.0

November 23, 2025 Fall semester ends

Spring 2026 Semester (November 24, 2025 - May 8, 2026)

November 24, 2025 Spring semester begins

November 24, 2025 – December 7, 2025 Block 12.5.1

December 8, 2025 – January 2, 2026 Winter Break (no classes)

January 5, 2026 – January 18, 2026 Block 12.5.2 January 19, 2026 – February 15, 2026 Block 13.0 February 16, 2026 – March 15, 2026 Block 14.0

March 16, 2026 – April 12, 2026 Block 15.0

April 13-17, 2026 REACH Week 2 April 20-24, 2026 IS Week 2

April 27, 2026 – May 8, 2026 Residency Immersive

May 8, 2026 Spring semester ends

May 11, 2026 Commencement

Mission, Vision, and Values

Mission

To provide a world-class medical education that ignites a passion for learning, a desire to serve, and an unwavering commitment to improve the health and well-being of patients and communities.

Vision

Our graduates will be a diverse community of compassionate healers, lifelong learners, and courageous leaders of change within the profession and in society. They will have the skills, capabilities, and resilience to lead the transformation of healthcare delivery in the nation, and a lifelong commitment to the highest values of the profession.

Values

Collaboration

Nurture a culture that fosters the collaborations needed to advance the health of patients and communities.

Equity

Promote equity by advancing access, opportunities, and outcomes for members of the KPSOM community.

Excellence

Pursue excellence acorss all education and health activities, driving quality outcomes.

Innovation

Foster a culture of innovation, discovery, and curiosity to pioneer advancements in healthcare and education.

Service

Serve the needs of students, patients, and communities with joy, compassion, and empathy.

Trustworthiness

Uphold the highest standards of transparency, integrity, and humility to foster trust among members of the KPSOM community.

Our Context

We will leverage the values and capabilities of our integrated health system, and the unique relationship between the independent Permanente Medical Groups and Kaiser Foundation Health Plan and Hospitals organization, to prepare students for future-facing clinical practice and health system leadership.

Background and History

History of Kaiser Permanente

Kaiser Permanente is one of the country's largest private nonprofit health plans, with approximately \$78 billion in annual revenues. Founded in 1945 by industrialist Henry J. Kaiser and Dr. Sidney Garfield, the organization has grown into a leading integrated healthcare delivery system that serves more than 12 million members in eight states and the District of Columbia. Today, Kaiser Permanente is recognized for providing high-quality, evidence-based healthcare through the advantages of its integrated health plan and care delivery model.

The Kaiser Permanente Medical Care Program refers to the integrated health system. Kaiser Permanente is not a legal entity but encompasses the integration of three separate entities that work in collaboration to ensure the delivery of high-quality, patient-centered care to members and their communities. It should be noted that although Kaiser Foundation Health Plan Inc. and Kaiser Foundation Hospitals are separate entities, they share a common board of directors and are often referred to as Kaiser Foundation Health Plan and Hospitals. The three entities comprising the Kaiser Permanente Medical Care Program are:

- Kaiser Foundation Health Plan, Inc.: A nonprofit, public-benefit corporation that contracts with individuals and groups to provide healthcare coverage. Kaiser Foundation Health Plan contracts with Kaiser Foundation Hospitals and the Permanente Medical Groups to provide healthcare services to its members. Kaiser Foundation Health Plan collects premiums and distributes funds to Kaiser Foundation Hospitals and Permanente Medical Groups to provide all necessary hospital and professional services.
- Kaiser Foundation Hospitals: A nonprofit, public-benefit corporation that owns and operates hospitals in California, Oregon, and Hawaii; owns outpatient facilities in all states where Kaiser Foundation Health Plan does business; provides or arranges hospital services; and sponsors charitable, educational, and research activities. Kaiser Foundation Hospitals provides or arranges for all hospital services for Kaiser Foundation Health Plan members. Each hospital is a community hospital that also cares for non-Health Plan members, especially those who arrive through the emergency department. Kaiser Foundation Hospitals is the parent organization (also called the sole corporate member) and primary funder for the Kaiser Permanente Bernard J. Tyson School of Medicine.
- The Permanente Medical Groups: Partnerships or professional corporations of physicians, with an independent legal entity in each of the eight Kaiser Permanente regions. The Permanente Medical Groups are responsible for providing and arranging all medical care and services in each of the regions. The Permanente Federation was formed in 1997 to represent the shared interests of the Permanente Medical Groups.

The contractual relationship between Kaiser Foundation Health Plan and Permanente Medical Groups is mutually exclusive, i.e., Kaiser Foundation Health Plan contracts exclusively with the Permanente Medical Groups for all professional services for members, and Permanente Medical Groups contract only with Kaiser Foundation Health Plan for payment; they do not accept other insurers. However, as needed to augment coverage, some services are provided through contracted networks of community hospitals, physicians, and other providers.

More than 22,000 physicians, 59,000 nurses, and 215,000 staff serve members and communities in

eight Kaiser Permanente Regions: Northern California, Southern California, Colorado, Georgia, Hawaii, Northwest (Oregon and parts of Washington), Washington, and Mid-Atlantic (Maryland, Virginia, and the District of Columbia).

Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) is funded through the Community Benefit Program of Kaiser Foundation Health Plan and Hospitals. The Community Benefit Office supports programs and services dedicated to providing medical care and other benefits to vulnerable populations, benefits to the broader community, and health research, education, and training programs.

History of Kaiser Permanente Bernard J. Tyson School of Medicine

Kaiser Permanente has a long history of engaging in education with residents, fellows, and medical students visiting from other institutions, as well as supporting rotations and other experiences in the clinical setting. Over the years, Kaiser Permanente physicians and leadership explored the possibility of creating a medical school, building on the organization's decades-long commitment to medical education through these respected and successful residency and fellowship programs.

In 2009, a team of leaders from the Permanente Medical Groups and its Community Benefit (CB) program began to explore the feasibility of a medical school. A core planning team conducted an indepth exploration and prepared a school strategy.

In alignment with the Permanente Medical Groups, the combined Kaiser Foundation Health Plan and Hospitals Board of Directors (acting for Kaiser Foundation Hospitals) approved the establishment of the medical school in late 2015, as well as basic parameters for overall governance, financing, and operations. Kaiser Foundation Hospitals formed a new California not-for-profit public benefit corporation—Kaiser Permanente School of Medicine, Inc.—that operates the Kaiser Permanente Bernard J. Tyson School of Medicine. Kaiser Foundation Hospitals is its sole corporate member (i.e., the entity that established the school of medicine and has the authority to approve school bylaws changes, approve selected school board members, and take other high-level actions). This model establishes a school with a medical education program possessing sufficient institutional autonomy while integrating the school with and leveraging the assets of Kaiser Foundation Hospitals, Kaiser Foundation Health Plan, and the Permanente Medical Groups.

Consistent with the standards and policies of the Western Association of Schools and Colleges Senior College and University Commission (WSCUC), the Kaiser Permanente Bernard J. Tyson School of Medicine Board of Directors is composed of eleven external (independent) directors and seven internal directors from Kaiser Foundation Health Plan, Kaiser Foundation Hospitals, and the Permanente Medical Groups. The Board of Directors was established in September 2016, governing the school by establishing policy and exercising fiduciary responsibility for the long-term well-being of the institution.

Kaiser Permanente Bernard J. Tyson School of Medicine appointed Dr. Mark A. Schuster, MD, PhD, as founding Dean and CEO in October 2017. The school of medicine underwent its preliminary accreditation visit with the Liaison Committee on Medical Education (LCME) in October 2018 and received preliminary accreditation on February 12, 2019. The inaugural class of fifty medical students began their studies on July 27, 2020.

The school of medicine leverages Kaiser Permanente's position as a prevention-focused, population-based organization with a social mission capable of world-class specialty care for its members. Its

most important differentiator is that the school is embedded in the Kaiser Permanente Medical Care Program, an integrated model of care and financing focused on the total health of populations. Students learn to be physician leaders and advocates for health.

State Authorization and Accreditation

Updates regarding the Kaiser Permanente Bernard J. Tyson School of Medicine's accreditation status can be found at medschool.kp.org/about/accreditation.

California Bureau for Private Postsecondary Education

The Kaiser Permanente Bernard J. Tyson School of Medicine has approval by the Bureau for Private Postsecondary Education (BPPE) to offer degree programs.

Any questions a prospective student may have that have not been satisfactorily answered by the institution may be directed to:

Bureau for Private Postsecondary Education

1747 North Market, Suite 225 Sacramento, CA 95834 www.bppe.ca.gov

888-370-7589 or by fax 916-263-1897 916-574-8900 or by fax 916-263-1897

Office of Student Assistance and Relief

The Office of Student Assistance and Relief is available to support prospective students, current students, or past students of private postsecondary educational institutions in making informed decisions, understanding their rights, and navigating available services and relief options. The office may be reached by calling (888) 370-7589, option #5, or by visiting <u>osar.bppe.ca.gov</u>.

Complaints

A student or any member of the public may file a complaint about this institution with the California Bureau for Private Postsecondary Education by calling 888-370-7589 (toll-free) or by completing a complaint form, which can be obtained on the bureau's website: bppe.ca.gov.

Institutional Accreditation Status of the WASC Senior College and University Commission (WSCUC)

Kaiser Permanente Bernard J. Tyson School of Medicine has been granted institutional initial accreditation by WASC Senior College and University Commission (WSCUC).

The WSCUC Visiting Team Report from KPSOM's Seeking Accreditation Visit 2, held November 19-22, 2024, can be accessed here. The WSCUC decision letter can be accessed here.

The Student Achievement and Outcome Data Fact Sheet can be accessed here.

WASC Senior College and University Commission (WSCUC)

1080 Marina Village Parkway

Suite 500

Alameda, CA 94501 Phone: 510-748-9001 Web: www.wscuc.org Email: wscuc.org

Liaison Committee on Medical Education (LCME)

Kaiser Permanente Bernard J. Tyson School of Medicine has achieved full accreditation and is listed in the LCME accredited directory.

The school's next full accreditation site visit will occur in Academic Year 2028/29.

For more information on the LCME and KPSOM's accreditation status, please visit <u>LCME.org</u> or contact <u>LCME@AAMC.org</u>.

Instructional Facilities

Primary Campus

98 South Los Robles Ave., Pasadena, CA 91101

The school's Medical Education Building is at the intersection of Green Street and Los Robles Avenue. This 83,000-square-foot, four-story structure contains state-of-the-art educational and simulation space; relaxation, study, and leisure space; student support services; and other critical medical school administrative services.

Flexible classroom/learning studio spaces can accommodate 48 to 112 students. In contrast, twelve small group rooms can accommodate 8 to 10 learners (and two faculty members). Students in Phases 1 and 2 of the MD curricula can hold simultaneous learning sessions/activities in the building. The flexible nature of the space enables the combining of both phases of students when desired. Space within the building also accommodates students from other healthcare disciplines for Interprofessional Collaboration (IPC) activities.

Library

Located in the Medical Education Building, KPSOM's Library provides access to electronic and print books, journals, online databases, and clinical information sources. The school offers online access to resources through a web-based tool called KPSOM Clinical Library. The KPSOM Clinical Library links to 17,000 KP-developed clinical resources (guidelines, member education, and other point-of-care resources), more than 12,000 subscribed and open-access full-text journals, over 9,000 subscribed and open-access online books, and a wealth of other resources.

Library Hours

The librarian will be available either in-person or remotely during the following hours: Monday through Friday, from 10 am to 7 pm. In addition, the librarian will offer additional hours as needed during high-demand times, such as exams.

Library Services

The librarian delivers an annual orientation for students and faculty, providing an overview of services, resources, and information literacy. The librarian will present updates on new services and resources to students and faculty throughout the year. Medical students and faculty may also request refresher classes, one-on-one instructional sessions, and course-based instruction. The librarian will also work with the Office of Research and Scholarship to support faculty research projects.

School of Medicine library resources can be accessed on or off-campus via the Internet. Students and faculty may also use a variety of online communication tools to request literature searches, as well as articles, books, and other resources not available from the library.

The school of medicine library participates in multiple document delivery systems, including DOCLINE, the National Library of Medicine's automated interlibrary loan (ILL) request, routing, and referral system, and Get It Now, a document retrieval service from the Copyright Clearance Center. The school of medicine is also a part of the FreeShare cross-regional DOCLINE Library Group, whose members agree to fill DOCLINE requests for affiliated users free of charge on a reciprocal basis.

Curricular Support

The librarian and library resources support the school's small-group clinical problem-solving activities and case-based learning, emphasizing the use of information resources and evidence-based decision-making. The librarian actively participates in the day-to-day academic activities of the school and serves as an ex-officio member of the Curriculum and Educational Policy (CEP) Committee. The librarian also collaborates with the Office of Research and Scholarship to support the students' required Scholarly Projects.

Simulation Center and Clinical Skills/Standardized Patient Area

The Simulation Center, located on the first floor of the Medical Education Building, allows students to practice the foundational skills required to care for patients fully. Students will learn real-world skills in the 8,800-square-foot simulation center, including a 6,337-square-foot Clinical Skills/Standardized Patient Area. Skills practiced in the Simulation Center include:

- Patient interviewing and advanced communication skills with standardized patient (SP) educators
- Physical examination with physical examination teaching associates (PETAs), SPs, and anatomical models
- Documentation, note-taking, and ordering and review of labs and imaging studies in the electronic medical record
- Management of urgent medical situations with life-like mannequins
- Clinical procedures with trainers that model portions of the body
- Intra- and interprofessional teamwork and team communication skills

Resources in this space include ten standardized patient examination rooms, three debriefing rooms, one pre-briefing classroom, four simulated hospital rooms, a nurse's station, three simulation control rooms, an interprofessional practice environment, and one procedural skills center. All spaces are equipped with audiovisual hardware to enable live streaming and recording of simulation events for feedback and scoring purposes.

In addition to having simulation mannequins for high-fidelity scenarios, the Simulation Center also supports additional state-of-the-art medical equipment for physician training, including ultrasound machines. The Clinical Skills/Standardized Patient Area and Simulation Center are modeled after the template design of clinical spaces in Kaiser Permanente medical centers, allowing students to train in environments that closely resemble their primary clerkship settings.

Anatomy Resource Center (ARC)

In the Anatomy Resource Center (ARC), students will engage in case-based, medium-sized group learning that provides opportunities for mastery of all anatomical sciences: surface, regional, and cross-sectional anatomy and embryology, histology, and diagnostic imaging.

Case-based sessions include problem-solving activities using a robust array of advanced resources, including:

A comprehensive collection of pre-dissected human cadavers and prosections preserved by

plastination

- A unique set of hand-crafted reproductions of human bones and pathological and trauma elements
- State-of-the-art augmented reality (AR)
- Advanced digital two and three-dimensional anatomy
- Functional anatomy and virtual microscopy interfaces
- Ultrasound devices and ultrasound machines
- Multi-user touch-interface anatomy workstations that allow students to visualize and interact
 with thousands of actual human structures in three-dimensional and cross-sectional views of
 the body

Core Clinical Training Sites

Longitudinal Integrated Clerkships

The Longitudinal Integrated Clerkship (LIC) allows students to take core clerkships in Emergency Medicine, Family Medicine/Internal Medicine, Obstetrics/Gynecology, Pediatrics, Psychiatry, and Surgery over the course of one year at one core medical center site, primarily in an ambulatory setting. Students practice core skills by following panels of patients over time while maintaining a one-on-one relationship with a preceptor and the preceptor's clinical team of nurses, pharmacists, and other clinical professionals. Students observe patients throughout the care continuum, including diagnosis, treatment, and follow-up.

LICs at the School of Medicine begin in the first year with Family Medicine/Internal Medicine and expands to all core clerkships in the second year. Students are hosted at one of the following Kaiser Permanente medical centers or their associated outlying medical offices in communities across the greater Los Angeles area: Downey, Los Angeles, Panorama City, San Bernardino County, South Bay, West Los Angeles, and Woodland Hills. A detailed map depicting each medical center is also available on Google Maps. Associated medical office addresses are not listed below.

Primary Clinical Training Sites:

Downey Medical Center 9333 Imperial Highway, Downey, CA 90242

Los Angeles Medical Center 4867 W. Sunset Blvd., Los Angeles, CA 90027

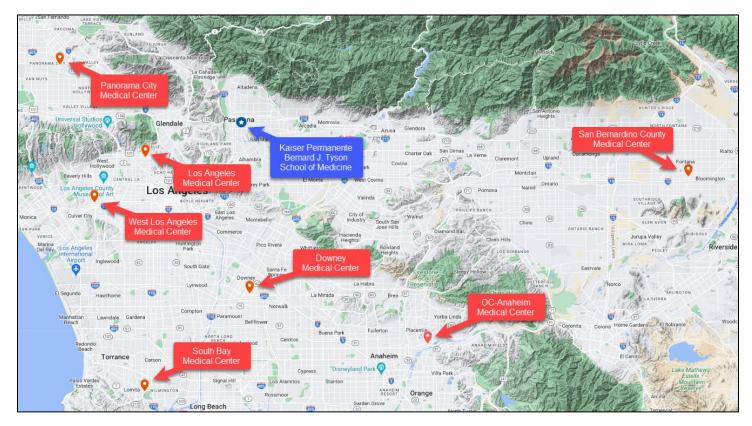
Orange County-Anaheim Medical Center 3440 E. La Palma Ave., Anaheim, CA 92806

Panorama City Medical Center 13651 Willard St., Panorama City, CA 91402 San Bernardino County Medical Center 9961 Sierra Ave., Fontana, CA 92335

South Bay Medical Center 25825 S. Vermont Ave., Harbor City, CA 90710

West Los Angeles Medical Center 6041 Cadillac Ave., Los Angeles, CA 90034

FIGURE 1 - PRIMARY CLINICAL TRAINING SITES



Other Clinical Experiences

In Phase 3 of the curriculum (years three and four), students can work in select additional medical centers within the Kaiser Permanente system and approved sites outside of Kaiser Permanente.

Security, Student Safety, and Disaster Preparedness

The Medical Education Building has seventy-one cameras at entrances to the building and the parking garage directly below the building. The cameras function at all times of day and night, with a minimum operating range below one foot-candle, and are a combination of pan, tilt, zoom, and fixed cameras. A uniformed security officer will be stationed on campus 24 hours, seven days a week. The guard will have secure video access to all security cameras, conduct regular walk-throughs of the building, and be available to escort students to their cars upon request.

The campus security system includes emergency call boxes on pedestrian walkways and parking lots. KPSOM and KP require the display of student ID badges to enter all facilities. Students and employees may activate emergency call boxes to notify security dispatch and trigger immediate camera call-ups for situation assessment. KPSOM security monitors the alarms 24 hours a day, seven days a week, at the security dispatch center at Walnut Center Kaiser Facilities, approximately four blocks away, and utilizes a comprehensive Alert Notification Network for communication in an emergency. KPSOM video systems use a robust recording process that allows security and law enforcement personnel to review more than 20 days of video and randomly monitor video for suspicious activity.

After regular business hours, the school locks all street entrances. Only select entries are accessible with a school of medicine identification badge. The card reader/identification badge system allows students access to all floors, including classrooms and student areas of the Medical Education Building. The campus is patrolled each night by certified security personnel.

Disaster Preparedness Training

All KPSOM students must complete active shooter and threat recognition and response training annually. These training sessions are available online via KP Learn. Also, the school periodically holds earthquake, fire, and other safety drills to ensure student awareness of the school of medicine safety and security policies and building evacuation procedures.

Emergency Notification System

All students are enrolled to receive emergency notifications from KPSOM's emergency notification system. This system allows the school of medicine to quickly distribute critical information to students, wherever they are located, during an emergency. The system enables students to stay informed in an emergency by sending alerts via electronic devices (e.g., mobile phones, laptop computers) through text messaging, voicemail, and email.

Security Notices

Security notices are issued to provide timely warning concerning potentially dangerous situations on or near the KPSOM campus. The information provided empowers our students and employees to make decisions or take appropriate actions concerning their safety. Security notices are distributed throughout KPSOM to make community members aware of significant crimes that occur at the school. The school distributes this information via the KPSOM email system.

General Policies

Compliance

Internal Reporting of Ethics and Compliance Concerns

KPSOM is committed to a culture of ethics and compliance and acts on reported ethics and compliance concerns. KPSOM students and employees are required to report ethics and compliance concerns internally. To report a concern as a student, you may contact a professor, any senior administrator, or the school's Chief Compliance Officer. In addition, you may report any concerns openly or anonymously with a call to 1-888-774-9100 or via reportlineweb.com/kp. To view the full content of this policy and instructions for reporting an ethics or compliance concern, please visit Internal Reporting of Ethics and Compliance Concerns.

Non-Retaliation

KPSOM is committed to creating and maintaining an environment where students can speak up and report ethics and compliance concerns. Retaliation or intimidation against individuals who, in good faith, report illegal, unethical, or otherwise inappropriate acts or who refuse to participate in wrongdoing is strictly prohibited. Furthermore, KPSOM does not permit retaliation against students, employees, members, patients, physicians, or any other person or entity for reporting ethics issues or suspected violations of laws and regulatory requirements. To view the full content of this policy, please visit Non-Retaliation.

Notifications Regarding Breaches of Protected Health Information

KPSOM has adopted Kaiser Permanente's Notifications Regarding Breaches of Protected Health Information Policy, NATL.NCO.PS.025, in its entirety, including medical students in the scope and coverage. The purpose of this policy is to describe the circumstances in which the school does or does not notify an individual whose Protected Health Information (PHI) has been breached; and due to its highly cooperative relationship with Kaiser Permanente, in which Kaiser Permanente does or does not notify a Kaiser Permanente customer, government regulators, and other persons or entities of breaches of PHI, including where substitute notice is required. To view the full content of this policy, please visit Notifications Regarding Breaches of Protected Health Information.

Information Technology

Acceptable Use

Technology owned or managed by KPSOM should be used for authorized academic activities or purposes related to school functions and operations. The KPSOM Acceptable Use policy establishes and describes the acceptable use of all technology and information resources owned or managed by the school or Kaiser Permanente, including but not limited to the rights and responsibilities of faculty, staff, students, and other members of the school community as they pertain to the use of these resources. To view the entire content of this policy, please visit <u>Acceptable Use Policy</u>.

Computer Viruses and Malware

KPSOM and KP safeguard their computing environments and data from malicious software (e.g., viruses, worms, Trojans) and other electronic attacks. The requirements contained within this policy

were established for the protection of data and Technology Resources (e.g., medical and computing systems/devices) that reside on or connect to the KPSOM or KP networks from 1) loss of data integrity, destruction of data, or unauthorized modification of data; 2) breach of confidentiality as a result of unauthorized data disclosure; and 3) interruptions of service or loss of network availability resulting from malicious software and other electronic attacks. To view the entire content of this policy, please visit Computer Viruses and Malware.

Electronic Asset Usage

KPSOM and KP electronic assets are educational tools and business assets. KPSOM provides students access to electronic assets to assist them in their education. The KPSOM Electronic Asset Usage policy defines and describes permissible uses of these electronic assets. To view the entire content of this policy, please visit Electronic Asset Usage.

Information Security Governance and Organization

KPSOM and KP Information Technology departments direct information security activities to ensure comprehensive protection against technology threats and risks. Due to its cooperative relationships with Kaiser Permanente, the school leverages KPIT resources to manage and maintain detailed information security policies. It aligns with objectives and provisions for securing KPSOM and KP information and technology resources. To view the entire content of this policy, please visit Information Security Governance and Organization.

Mobile Device Access to Campus Networks

KPSOM provides mobile devices to students to aid them in their educational program. This policy ensures adequate controls for the efficient use of KPSOM mobile devices and compliance with federal and state tax regulations. To view the full content of this policy, please visit Mobile Device Access to Campus Networks.

User Access Management

Access to Kaiser Permanente and KPSOM applications is centralized through the AccessNow system. AccessNow requires several provisions for each user account to align the use of this centralized service. For example, each account is assigned a National User ID (NUID). Users agree to enroll in Multifactor Authentication (e.g., PingID) when logging into applications and comply with password security requirements. This policy standardizes the provisions, corrective actions, governing bodies, and processes for creating and using AccessNow accounts. To view the entire content of this policy, please visit <u>User Access Management</u>.

Learning Environment

Academic Freedom

In support of the effective creation and transmission of new knowledge in academic medicine, KPSOM is committed to the fundamental principle of academic freedom. For students and faculty, this includes the freedom to conduct scholarly activities, such as engaging in research, publishing, and disseminating findings, and for faculty, teaching, in all cases, consistent with the principles outlined in the Academic Freedom policy. To view the full content of this policy, please visit Academic Freedom.

Equity, Inclusion, and Diversity

The Kaiser Permanente Bernard J. Tyson School of Medicine, Kaiser Foundation Health Plan, Inc., Kaiser Foundation Hospitals, and its subsidiaries (KFHP/H) deeply commit to practicing equity, inclusion, and diversity. Please visit the following links for additional information:

Equity, Inclusion, and Diversity Policy
Creating an Inclusive, Supportive Community

Non-Discrimination, Harassment-Free Environment, and Non-Retaliation

KPSOM is committed to maintaining an environment that is free from discrimination and harassment for all students, applicants for admission, faculty, employees, applicants for faculty appointments or employment, and third parties such as contractors, vendors, volunteers, and visitors (collectively, "members of the school's community").

The school also prohibits retaliation against any individual who, in good faith, reports or opposes discrimination or harassment or assists, cooperates with, or participates in any procedures or investigations related to reports of discrimination or harassment or is perceived as having done so. Therefore, all school community members should object to discrimination and harassment prohibited by this policy when they experience or witness it and report violations without fear of retaliation.

Any violation of this policy may result in corrective/disciplinary action up to and including dismissal as a student, termination of faculty appointment, employment status, or other relationships, as applicable.

Students and admission applicants may report any policy violation to the Office of Student Affairs or the school's Chief Compliance Officer.

To view the full content of this policy, please visit <u>Non-Discrimination</u>, <u>Harassment-Free Environment</u>, and <u>Non-Retaliation</u>.

Positive Learning Environment and Student Mistreatment

KPSOM promotes a positive learning environment. Unprofessional behavior and mistreatment of others are unacceptable and are not tolerated. The Positive Learning Environment and Student Mistreatment policy outlines expectations of behaviors that promote a positive learning environment for educators, students, and others who are a part of the educational experience. This policy also identifies, reports, and addresses unprofessional behavior and mistreatment. For this policy's full content, please visit the Positive Learning Environment and Student Mistreatment. Learning environment observations may be reported confidentially or anonymously via the Learning Environment Reporting website.

Students can also make reports directly to the Office of Student Affairs.

Prohibition of Sexual Misconduct, Sex Discrimination, Sexual Harassment, and Retaliation

KPSOM is committed to maintaining an environment free from all forms of sex discrimination, sexual harassment, and other forms of sexual misconduct, including sexual assault, domestic violence, dating violence, sexual exploitation, and stalking. Discrimination, harassment, and other misconduct

based on sex (including pregnancy, childbirth or related medical conditions, and breastfeeding or related medical conditions), gender, gender identity, gender expression, transgender status, sex stereotyping, and sexual orientation, which may include being perceived to have any of the preceding statuses or being associated with someone who has, or is perceived to have, any of these statuses, is prohibited.

The school also prohibits retaliation against any individual who, in good faith, reports or opposes conduct contrary to this policy or assists, cooperates with, or participates in any procedures or investigations related to such reports or is perceived as having done so. The school is committed to stopping prohibited conduct, preventing its recurrence, addressing its effects, and eliminating hostile environments.

Any alleged violation of this policy will result in an investigation and may result in corrective or disciplinary action up to and including dismissal of a student or termination of a faculty, employment, or other relationships as appropriate. To view the full content of this policy, including when and how to report, resources and assistance, and review, investigations, and corrective or disciplinary action, please visit Prohibition of Sexual Misconduct, Sex Discrimination, Sexual Harassment, and Retaliation and the Title IX Program website.

Prohibition of Firearms

Firearms are prohibited on KPSOM premises and in Kaiser Permanente working environments unless an exception applies (e.g., law enforcement). To view the entire content of this policy, please visit Prohibition of Firearms.

Restricted Relationships

KPSOM prohibits faculty and staff from holding reporting or oversight responsibility, whether direct or indirect, for any person (e.g., a student, trainee, or another faculty or staff member) with whom they have, or have had, a romantic or sexual relationship, a family relationship, or a clinical relationship. Such relationships in this context are inherently unequal and create risk for all parties, including the school. Relationships in this context may create or suggest to others the possibility of conflict of interest, coercion, favoritism, or fundamental unfairness. Even when such relationships do not involve individuals for whom one has reporting or oversight responsibility but are between individuals of different levels of authority within the school hierarchy (e.g., a faculty member and any student, or a manager and a staff member in another department), they can create similar risks, particularly in the case of romantic or sexual relationships, and the individuals involved are expected to take special care to avoid those risks. To view the entire content of this policy, please visit Restricted Relationships.

Service Animals

KPSOM and Kaiser Permanente are committed to providing education and healthcare services, programs, and activities free from discrimination, including individuals with disabilities. To view the entire content of this policy, please visit <u>Service Animals</u>.

Smoke and Tobacco-Free Campus

KPSOM and KP recognize the health hazards of smoking and tobacco use. As educators of future physicians, KPSOM is obligated to assert these activities' demonstrable risks strongly. To this end, KPSOM and KP prohibit all smoking and tobacco use at all KPSOM and KP facilities and campuses, interior and exterior. To view the entire content of this policy, please visit <u>Smoke and Tobacco Free</u>.

Student Code of Conduct

Students must always meet standards of professional behavior. At matriculation, all students will review the Student Code of Conduct and agree to abide by the requirements. The Registrar maintains documentation of this attestation in the student information system. Potential Student Code of Conduct violations are referred to the Senior Associate Dean for Student Affairs for review. They may be forwarded to the Learning Environment and Professionalism (LEAP) Committee for further investigation. If the LEAP Committee determines a violation occurred, the matter is referred to the Student Progress and Promotion (SPP) Committee to determine sanctions. To view the full content of this policy, the Professionalism Attributes, and the Student Code of Conduct, please visit the Student Code of Conduct.

Student Grievances

KPSOM established procedures for resolving student complaints or grievances arising from a student's claim that a faculty, staff, or administration member has adversely impacted the student by an act or decision. Students should refer to the Student Grievances policy when no other policy or procedure exists to appropriately address and effectively resolve a student's complaint or grievance. To view the full content of this policy, please visit Student Grievances.

Threats and Violence in the Workplace: Prevention and Management

KPSOM and Kaiser Permanente take reasonable preventive measures to provide a safe environment for everyone on KPSOM, KP premises, and KP working environments. KPSOM and KP have zero tolerance for acts or threats of violence and intimidation that involve or affect KPSOM or KP operations. Please visit Ihreats and Violence in the Workplace: Prevention and Management to view the full content of this policy.

Student Services

KPSOM places a high priority on supporting student well-being and resilience to ensure students thrive throughout their enrollment. Students have access to a comprehensive network of support and resources to ensure they find the help they need when they need it.

Office of Student Affairs

The Office of Student Affairs provides services, programs, and resources to support KPSOM students' personal and professional development and well-being throughout their medical education. It is responsible for:

- Comprehensive student support services, including academic advising and support, physician coaching through the REACH (Reflection, Education, Assessment, Coaching, Health, and Well-Being) course, well-being programming, student psychological services, and career advising
- Assistance with registration and scheduling, including oversight and approval of elective scheduling
- Provision of financial aid, including emergency loans, financial counseling, and receipt of payments as needed
- Oversight of student compliance, including immunizations, tuberculosis screening, HIPAA compliance, bloodborne pathogen training, and pathogen exposure management
- Support and oversight of student interest groups, affinity groups, and peer tutoring
- Provision of medical specialty and residency selection advising and oversight of the residency application and selection process
- Delivery of extracurricular student well-being programs, such as mindfulness courses, yoga classes, and lectures or lecture series on health, well-being, and resilience topics

The Office of Student Affairs also supports extracurricular community involvement, social events, and ceremonies (e.g., white coat ceremony, commencement, and Match Day).

Academic Support and Advising

KPSOM recognizes that every student needs support to succeed in medical school. Our team supports student learning and academic development throughout medical school. We encourage students to meet with the Academic Support and Advising staff to develop effective study plans that address time management, learning and testing skills, and other concerns. Students are encouraged to set and accomplish goals using school resources, individualized advisement, and action planning.

Appointment topics may include, but are not limited to:

- Understanding what tools are available for increasing studying efficiency
- Learning to manage your time better
- Preparing for an upcoming exam in a course that has been a challenge
- Managing test anxiety and stress

- USMLE test-taking strategies
- Developing a Step 1 study schedule
- Developing a Step 2 CK study schedule

Please visit <u>Academic Support and Advising</u> for additional information on the services offered through Academic Support and Advising or make an individual appointment.

Career Advising and Development

The school of medicine has developed a career advising program and timeline modeled upon the <u>Association of American Medical Colleges (AAMC) Careers in Medicine (CiM)</u> program. Required career exploration activities will occur twice annually in the REACH course. Additional activities include required yearly advising sessions and optional co-curricular workshops and events related to choosing a specialty, CV writing, interviewing skills, and preparing for the residency match. For further information, please visit <u>Career Advising and Development</u>.

Specialty Chat Program

Specialty chats are an excellent opportunity to connect with a KPSOM clinical faculty member to learn more about the specialty of your choice. We designed these sessions to be casual in nature and facilitate career exploration and networking. For additional information, please visit Career Advising and Development.

Shadowing

Shadowing physicians allows students to get first-hand experience exploring different medical specialties outside the formal medical curriculum. Over 250 KP Physicians in diverse specialties and subspecialties have signed up to host KPSOM students. If desired, students can contact Career Advising and Development to learn about local shadowing opportunities.

Specialty Interest Groups

Students can further explore specific medical specialties through Specialty Interest Groups at KPSOM. Specialty Interest groups are advised by faculty Career Advisors and the Office of Student Engagement. These groups provide students with the opportunity to:

- Use educational resources to explore shared interests
- Facilitate networking with relevant specialty & faculty physicians
- Plan informative and engaging initiatives & programming
- Learn from one another
- Build communities of peer-support

For additional information on current Specialty Career Interest Groups, please visit the <u>Student</u> Organizations SharePoint page.

Disability Access

Our Director of Academic Support and Advising and Disability Access is available to answer your questions and discuss how to support your educational experience.

KPSOM determines disability accommodations through an interactive process that requires the engagement of both the student and the Disability Access Office. We advise newly admitted students to begin this process once they have confirmed their intent to enroll in the school. Current students should engage with the Disability Access Office once they have identified a need.

If you require an educational accommodation based on a permanent or temporary disability, please visit the <u>Disability Access Office</u> website to schedule an appointment. You may also view the full text of our disability policy at <u>Disability Support Services and Educational Accommodations</u>.

Inclusion and Well-Being

Medical school can be a high-stress environment. Improving the well-being of our medical students is essential to our mission. Our holistic approach to student health and well-being acknowledges many facets contributing to your experiences of self, others, and the world. These well-being dimensions interact to contribute to your quality of life.

We support you, provide resources, opportunities, and strategies for learning and engagement, and enhance your overall well-being. Please visit the <u>Health and Well-Being</u> website for additional information

Immunization Requirements

KPSOM requires documentation of immunization compliance from all medical students before matriculation. All medical students must comply with these requirements throughout their tenure in the medical school program, even in non-clinical curriculum segments. Students are encouraged to obtain documentation of required vaccinations (see list below) from their primary healthcare provider or another provider before matriculation.

Tuberculosis (TB) Screening

If negative TB skin test (TST) or blood test (IGRA) history, provide documentation of the following:

- 1) Either 1 TST within two years AND another TST within three months of start; OR
- 2) One negative IGRA within three months of start

If positive TST/IGRA history, provide documentation of:

- 1) Positive TST/IGRA test result **OR** history of INH or other TB therapy, **AND**
- 2) A negative chest X-ray within one year

Measles, Mumps, Rubella, Varicella Immunity Screening

Demonstrate immunity to measles, mumps, rubella, and varicella by one of the following:

- 1) Documentation of two MMR vaccines and two varicella vaccines **OR**
- 2) Positive titers **OR**
- 3) Documented laboratory confirmation of disease (MMRV), or diagnosis of a history of varicella infection by a healthcare provider

Hepatitis B Immunity Screening

- 1) Demonstrated immunity by a positive hepatitis B antibody (accepted only with a completed documented hepatitis B vaccine series) **OR**
- 2) Present proof of past infection (i.e., positive HBcAb or HBsAg), OR
- 3) Begin/complete a hepatitis B vaccine series followed by an antibody test (For those with documentation of a completed Hepatitis B vaccine series, a post-vaccination titer should be completed) **OR**
- 4) Sign a Hepatitis B Vaccine Declination

Tetanus, Diphtheria, and Acellular Pertussis (Tdap) Immunization

1) Provide proof of a Tdap vaccine received within the past ten years **OR**

- 2) Obtain updated Tdap vaccine OR
- 3) Sign a Tdap Declination

ADDITIONAL RECORDS

Documentation of COVID-19 Vaccination and Boosters

Documentation of Seasonal Influenza Vaccination (between September – March)

Health Screening

Students assigned to specific Service-Learning sites may be required to complete a health screening form at the request of the site.

Annual Requirements

The school also requires students to obtain influenza vaccines annually and undergo annual screening for the absence of tuberculosis. The appropriate testing is dependent on their TST status, as noted above. The influenza vaccine will be administered free in the appropriate Kaiser Permanente clinical setting or at Employee Health Services. Influenza vaccination is required for all medical students unless they obtain a medical waiver. If a student has a medical waiver, they must always wear a face mask in clinical settings during influenza season. If indicated, students can obtain an annual TB screening or chest radiograph via Employee Health Services at Kaiser Permanente. Please visit the Immunizations and Health Screenings for Medical Students Policy for additional information.

Housing Resources

KPSOM does not provide on-campus housing for students. Please note KPSOM is not responsible for finding or assisting students in locating housing. However, a full range of off-campus housing is available for KPSOM students, from studio apartments to single-family homes. The average cost of a studio apartment in the Pasadena area is \$2,094 per month. For available listings, please visit our Housing Resources website.

Learning Communities

Learning Communities are intentionally designed longitudinal groups of students and faculty. At KPSOM, they serve as a vehicle for co and extra-curricular student engagement initiatives. Through Learning Communities, we strive to support students in becoming their best selves through mentorship, belonging, leadership, and well-being while creating an inclusive community that allows them to thrive. Our Student Council is one of our Learning Communities initiatives. For additional information, please visit our Learning Communities website.

Learning Environment

All KPSOM community members are responsible for maintaining a welcoming and inclusive learning environment. We are committed to fostering a safe and positive culture that promotes student success and well-being. We follow the Association of American Medical Colleges (AAMC) guidelines and "adheres to human dignity."

The Office of Student Affairs invites your feedback on the KPSOM learning environment. You may report concerns about any mistreatment, bias, or other unacceptable conduct experienced or

witnessed or share your compliments and commendations, recognizing the supportive contributions of students, faculty, and staff.

To learn more about your rights and responsibilities, identify mistreatment/bias incidents, or report mistreatment or commendations, please visit our Learning Environment website.

Rideshare Programs

KPSOM provides rideshare vouchers to facilitate student travel to and from their Longitudinal Integrated Clerkship (LIC) and Service-Learning sites. Once registered with the program, students will automatically receive vouchers monthly while enrolled in Phases 1 and 2 of the MD curricula. For additional information, please visit <u>Rideshare Services</u>.

Student Council

The KPSOM Student Council allows students to develop their leadership skills while learning about aspects of medical education and advocating for themselves and their peers. The Student Council is also embedded in our Learning Communities structure to ensure that the interests of all students are represented. All students are considered members of the Student Council, but those interested in serving on one of the following six committees must apply for election or appointment:

- Admissions Ambassadors
- Class Board
- Equity, Inclusion, and Diversity Committee
- Honor Council
- Student Curricular Board
- Student Well-Being Committee

For additional information, please visit our Student Council website.

Student Health and Disability Insurance

All KPSOM students must have comprehensive health insurance coverage while enrolled. Students matriculating into the first five cohorts can receive a free Kaiser Permanente student health insurance plan.

Students wishing to remain in their existing health insurance plan must submit a waiver request by June 30. The waiver request must include documentation that their current health insurance plan is active and provides coverage comparable to the student health insurance plan. For additional information on waiving out or enrolling in the student health insurance plan, please visit Student Access to Healthcare Services. For the full text of this policy, please see Student Access to Healthcare Services.

Kaiser Permanente Student Health Insurance Coverage

The Kaiser Permanente student health insurance plan covers the entire academic year (July 1, XXXX to June 30, XXXX). At their own expense, students may enroll their spouse, domestic partner, or dependents in the Kaiser Permanente student health plan at the start of each academic year or after a qualifying event.

The KPSOM student health insurance plan provides comprehensive medical, prescription, mental health, dental, and vision coverage. With our EPO plan, you can obtain care from any Kaiser Permanente healthcare professional within our integrated care delivery system across eight states. When you are in the United States but not near a Kaiser Permanente facility, you can see any doctor

in the PHCS Network and pick up your prescriptions in the OptumRx pharmacy network. Please visit our <u>Student Healthcare Resources</u> website for the Summary of Benefits and Coverage and the New Member Handbook.

Insurance Benefits and Leave of Absence

Students on a leave of absence may continue their enrollment in the KPSOM student health insurance plan for the remainder of the current policy period. Students who remain enrolled in the insurance plan will be personally responsible for paying the premium for the rest of the policy period. Dismissed or withdrawn students may continue their KPSOM student health insurance plan for the remainder of the current policy period. Students who remain enrolled in the insurance plan will be personally responsible for paying the premium for the rest of the policy period.

Students whose enrollment in the KPSOM student health insurance plan has lapsed during their leave will be automatically re-enrolled in the insurance plan. Alternatively, students who wish to opt out of the KPSOM student health insurance plan must submit documentation of active, equivalent coverage within thirty calendar days of their return to active enrollment.

Disability Insurance

Upon matriculation, KPSOM enrolls all students in a required disability insurance plan. The disability coverage will pay a monthly benefit if a student becomes disabled due to sickness or injury. Students will have the option to continue coverage during their residency. After residency completion, covered residents can convert to an individual, non-cancelable disability income policy without medical underwriting. For additional information on disability insurance benefits, please visit our Student Healthcare Resources website.

Student Organizations

Participation in a student organization allows students to enhance their leadership skills, build community amongst peers, and develop professional connections with faculty and staff advisors. At KPSOM, Student Organizations are categorized as Affinity-Based, Specialty-Based, and Student Interest groups. KPSOM provides all students with a membership in the American Medical Student Association (AMSA) and another affinity-based medical school organization of their choosing.

For a complete listing of registered student organizations and to learn how to become involved, please visit <u>Student Organizations</u>.

Student Privacy Rights

The Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) affords matriculated students certain rights concerning their educational records in accordance with applicable state and federal laws and regulations. These rights include:

- 1. The right to inspect and review their education records within 45 days of the day the school of medicine receives an access request. Students should submit to the Registrar written requests that identify the document(s) they wish to inspect. The Registrar will make access arrangements and notify the student of the time and place for inspection. Should the Registrar not maintain the records requested, the Registrar will direct the student to the applicable school official.
- 2. The right to request the amendment of any part of their education records that a student believes is inaccurate or misleading. Students who wish to request an amendment to their educational record should write the official responsible for the record, clearly identify the part of

the record they want to be changed, and specify why it is inaccurate or misleading. Should the school decide not to amend the record, the Registrar will notify the student of the decision and their right to appeal.

- 3. The right to consent to disclosures of personally identifiable information in the student's education records to third parties, except when KPSOM policy allows disclosure without the student's consent. These exceptions include the following:
 - a. Disclosure to school officials with legitimate educational interests
 - i. A "school official" is a person employed by the school in an administrative, supervisory, academic or research, or support staff position (including school security personnel and health staff); contractors, consultants, and other outside service providers with whom the school has contracted; a member of the Board of Directors; or a student serving on an official committee or assisting another school official in performing their tasks. School officials have a legitimate educational interest if they need to review an education record to fulfill their professional responsibilities.
 - b. Disclosure to parents if the student appears as a dependent on their most recent tax return.
 - c. Disclosure to appropriate individuals (e.g., parents/guardians, spouses, healthcare personnel, police) if the disclosure is connected with a health or safety emergency. The knowledge of such information must be necessary to protect the health or safety of the student or other individuals.
 - d. Disclosure to a parent or legal guardian of a student, information regarding the student's violation of any federal, state, or local law or of any rule or policy of the institution governing the use or possession of alcohol or a controlled substance if the school has determined that the student has committed a disciplinary violation concerning the use or possession and the student is under the age of 21 at the time of the disclosure to the parent/guardian.
 - e. Disclosure to various authorized representatives of government entities (such as compliance with Student and Exchange Visitors Information System [SEVIS], Solomon Amendment)

KPSOM policy allows the school of medicine to designate certain student information as "directory information." Directory information may be made available to any person without the student's consent unless the student gives notice. KPSOM has designated the following as directory information:

- student's name
- address
- telephone number
- email address
- student ID photo
- major field of study
- school,

- classification,
- participation in officially recognized activities,
- dates of attendance.
- · degrees and awards received,
- the most recent previous educational agency or institution attended by the student

Any student who does not wish to permit disclosure of their directory information should notify the Registrar in writing. Once received, the Registrar cannot release any element of the directory information listed above except as authorized by statute. However, the request for nondisclosure does not apply to class rosters in online class management applications, rosters of groups a student may join voluntarily in online co-curricular engagement applications or rosters of other information on the websites of student organizations that a student may join. Neither class rosters in online class management applications nor residential rosters in online co-curricular engagement applications are available to the public.

As of January 3, 2012, the US Department of Education's regulations expanded the circumstances under which students' education records and personally identifiable information (PII) contained in such records—including Social Security Numbers, grades, or other private information—may be accessed without consent. First, the US Comptroller General, the US Attorney General, the US Secretary of Education, or state and local education authorities ("Federal and State Authorities") may allow access to student records and PII without consent to any third party designated by a Federal or State Authority to evaluate a federal- or state-supported education program. The evaluation may relate to any program "principally engaged in the provision of education," such as early childhood education and job training, and any program that an education agency or institution administers.

Second, Federal and State Authorities may allow access to education records and PII without consent, including researchers performing certain studies, even when the school objects to or does not request such research. Federal and State Authorities must obtain certain use-restriction and data security promises from the third parties they authorize to receive PII; however, the authorities need not maintain direct control over the third parties.

State Authorities may collect, compile, permanently retain, and share without student consent PII from education records connected with Statewide Longitudinal Data Systems. They may also track student participation in education and other programs by linking PII to additional personal information obtained from other Federal or State data sources, including workforce development, unemployment insurance, child welfare, juvenile justice, military service, and migrant student records systems.

Should a student believe that the School of Medicine failed to comply with student privacy policies, they may file a complaint using the procedures outlined in the <u>Student Grievance Policy</u> section of this catalog.

Students, faculty, or staff with questions about student privacy rights should contact the Registrar.

Kaiser Permanente Bernard J. Tyson School of Medicine Directory

Individual listings in the online student directory include the student's full name, photo, and KPSOM email address. Student listings in the directory are available to the School of Medicine community via login ID and password. Students may choose to block individual directory items. The Registrar will omit students who requested non-disclosure of their directory information from the online directory.

Directory information should be kept current. Students may report address changes, emergency

contact information, and missing person contact information via the online Student Portal.

Limits of Confidentiality

Imminent Harm to Self or Others. Consistent with federal law and KPSOM policy, the school of medicine may release student information typically considered confidential to appropriate individuals (e.g., healthcare personnel, police) if such information is necessary to protect the student's or other individual's health or safety.

Policy on Sexual Harassment and Sexual Misconduct. Students who experience violations of this policy are encouraged to report such incidents. However, students are advised that all School of Medicine faculty, staff, or administrators are not confidential resources unless specifically designated (see <u>Prohibition of Sexual Misconduct, Sex Discrimination, Sexual Harassment, and Retaliation</u>).

Recordkeeping

Per section 94900 of the California Educational Code, the Kaiser Permanente Bernard J. Tyson School of Medicine retains the following records:

- The name, address, email address, and telephone number of each student who enrolled in an educational program in the institution
- The degrees or certificates granted by the institution, their conferral date, the courses and units
 on which the school awarded the degree or certificate, and the grades earned by the student in
 each course

The school maintains a file for each student who enrolls, regardless of if they complete the MD degree. In addition to the requirements outlined in section 94900, the School of Medicine includes the following student records in each student file:

- Written records and transcripts of any formal education or training, testing, or experience that
 are relevant to the student's qualifications for admission to the institution or the institution's
 award of credit or acceptance of transfer credits, including the following:
 - Verification of high school completion or equivalency or other documentation establishing the student's ability to do college-level work, such as successful completion of an ability-to-benefit test
 - Records documenting units of credit earned at other institutions that have been accepted and applied by the institution as transfer credits toward the student's completion of an educational program
 - Grades or findings from any examination of academic ability or educational achievement used for admission or college placement purposes
 - All of the documents evidencing a student's prior experiential learning upon which the institution and the faculty base the award of any credit
- Personal information regarding a student's age, gender, and ethnicity if the student has voluntarily supplied that information
- Copies of all documents signed by the student, including contracts, instruments of

indebtedness, and documents relating to financial aid

- Records of the dates of enrollment and, if applicable, withdrawal from the institution, leaves of absence, and graduation
- In addition to the requirements of section 94900(b) of the code, a transcript showing all of the following:
 - The courses or other educational programs that were completed or were attempted but not completed, and the dates of completion or withdrawal
 - Credit awarded for prior experiential learning, including the course title for which credit was awarded and the amount of credit
 - Credit for courses earned at other institutions
 - Credit based on any examination of academic ability or educational achievement used for admission or college placement purposes
 - o The name, address, website address, and telephone number of the institution
- For independent study courses, course outlines or learning contracts signed by the faculty and administrators who approved the course
- The dissertations, theses, and other student projects submitted by graduate students
- A copy of all student financial aid-related documents as required by law or by a loan guarantee agency
- Documentation of all money received from, or on behalf of, the student and the date or dates on which the institution received the funds
- A document specifying the amount of a refund, including the amount refunded for tuition and the amount for other itemized charges, the method of calculating the refund, the date the school processed the refund, and the name and address of the person or entity to which the school remitted the refund
- Copies of any official advisory notices or warnings regarding the student's progress
- Complaints received from the student

Student Psychological Services (SPS)

All of us are susceptible to difficult life events or challenges that may affect our mental health. Student Psychological Services believes in providing confidential, individualized services based on your unique identity, experiences, and needs. Students can access individual psychotherapy, 24/7 crisis services (during business hours through SPS and after-hours crisis services available through EAP), informal 20-minute problem-solving check-ins, and referral services. Students can schedule most services as in-person or video visits. Students may also participate in SPS outreach workshops that occur throughout the year. For additional information or to schedule an appointment, please visit Student Psychological Services.

Student Affairs Policies

Academic Honesty

Student academic honesty is a fundamental requirement of the educational process. Acts of academic dishonesty should be reported and are subject to investigation and sanctions. To view the full content of this policy, please visit <u>Academic Honesty</u>.

Add/Drop Policy

This policy provides guidance on applicable drop/add periods during each phase curriculum. To view the full content of this policy, please visit the Add/Drop Policy.

Attendance and Excused Absence

Students enrolled in the KPSOM are expected to exhibit professional behavior, including punctual and regular attendance for all academic and clinical responsibilities at all learning sessions and assessments, both clinical and non-clinical. Students must be prepared to contribute fully and consistently to learning teams in the classroom and healthcare teams providing patient care. Absences do not absolve the student of these responsibilities, whether excused or unexcused.

The Attendance and Excused Absence policy governs circumstances under which absences may be excused, including from scheduled assessments: 1) to ensure that students can access personal healthcare and support, 2) to allow students to participate in religious observances, including religious holidays, and 3) to allow students to manage unplanned emergent events, such as acute illness, a death in the family, family illness, or childcare conflict. Please view the full text of the Attendance and Excused Absence policy for information on requesting excused absences, well-being blocks, or retroactive excused absences,

Bloodborne Pathogen, Body Fluid, or Environmental Hazard Exposure

All KPSOM students must complete online training annually through KPLearn, including training on universal precautions. A student exposed to blood-borne pathogens or body fluids through a needle stick, laceration, or environmental exposure must:

- 1. Stop patient care activity as soon as it is safe for the patient.
- 2. Thoroughly cleanse the exposed area as quickly as possible.
- 3. Seek immediate medical attention, ideally within one to two hours, at the treatment site designated by the facility where the exposure occurred.
 - Students may choose to use an outside healthcare provider for post-exposure evaluation and associated follow-up; however, the student may be responsible for the related costs.
- 4. Follow the requirements outlined in the facility's protocol where the exposure occurred.
- 5. Notify your clinical experience supervisor.
- 6. Notify the Office of Student Affairs.

The Blood Borne Pathogen ID badge attachment distributed during the Early Immersive Experience course provides specific instructions for your assigned LIC site. Please visit <u>Bloodborne Pathogens</u>, <u>Body Fluid</u>, <u>or Environmental Hazard Exposure</u> to view the full content of this policy.

Disability Support Services

See Disability Access Office.

Drug Abuse and Alcohol Prevention

KPSOM policy is to provide an environment free from the abuse of alcohol and drugs. The school adopts and puts into effect programs to prevent the unlawful manufacture, distribution, dispensation, possession, or use of illegal drugs or alcohol by students on school property, clinical sites, or school-sponsored activities or events. The school also offers anti-drug and alcohol abuse programming. For the entire content of this policy, please visit Drug Abuse and Alcohol Prevention.

Drug Testing and Prohibited Drug and Alcohol Use

KPSOM is committed to providing the highest level of educational activity and professional conduct through its programs. The school is responsible for ensuring that students are functioning free from the influence of illicit or illegal substances. The use of illegal substances is prohibited. Controlled substances are also prohibited unless appropriately prescribed by a clinician.

The Drug Testing and Prohibited Alcohol Use policy ensures that students supporting patients' health, safety, and welfare in clinical settings can use good judgment and engage in ethical behavior. The school must promote safe and high-quality patient care, protect student privacy, and identify students who need support, treatment, and intervention. KPSOM students must submit to drug testing or evaluation when there is reasonable suspicion of prohibited alcohol or drug use or evidence of possible impairment. For the entire content of this policy, please visit Drug Testing and Prohibited Alcohol Use.

Enrollment Agreement

See Registration.

Leave of Absence

See Student-Initiated Changes in Enrollment Status.

LIC and Service-Learning Site Assignment

KPSOM assigns students to clinical instructional sites that provide appropriate learning opportunities and patient populations to ensure students obtain the clinical experiences required for graduation. Students with appropriate rationale can request an alternative site assignment if circumstances allow. For the full text of this policy, please view the <u>LIC and Service-Learning Site Assignment</u>.

Missing Student Notification

KPSOM is committed to creating and preserving a safe environment for its students. In support of this commitment and to align with the standards and requirements set forth by the Higher Education Opportunity Act of 2008, the school established rules and procedures if a student is reported missing. Upon receiving a missing student report, the school will contact security and the appropriate local authorities to investigate the situation. If the school cannot locate the student within 24 hours, it reserves the right to contact local law enforcement and the registered confidential contact person. For the full text of this policy, please visit Missing Student Notification.

Standards of Appearance in Clinical Settings

Students must maintain an appearance that demonstrates respect for all and meets professional standards. While interacting with patients, including during simulation experiences, the appearance of students should be clean and neat and aligned with the professional appearance of a physician caring for the ill. Please visit the Student Appearance in Clinical Settings policy for more information about attire and grooming requirements.

Student Access to Healthcare Services

See Student Health and Disability Insurance.

Student Access to Medical Student Educational Records

Students have the right to physically review their educational records in the presence of a designated school representative. The school prescribes and enforces guidelines for educational record access and storage. For additional information, please visit the Access to Medical Education Records policy.

Student ID Badges

All KPSOM enrolled or visiting students must wear a school-issued ID badge while on campus or attending a clinical experience, clerkship, or Service-Learning site. All ID badges must be worn on the front upper torso and be visible to observers, including patients. See the <u>Student ID Badge</u> policy for additional information.

Student Lactation Support

KPSOM promotes and supports the option for its students to breastfeed or chest feed their children. The school has established requirements to support and encourage breastfeeding or chestfeeding students in line with this commitment. All students are permitted to breastfeed, chest feed, express, or store milk at the school. The Lactation Room is in room 30R12, on the third floor of the Medical Education Building. Please contact the Director of Academic Support and Advising for questions regarding the Lactation Room. To view the full content of this policy, please visit the Student Lactation Support policy.

Student Social Media

Students must demonstrate professional, ethical, and legally appropriate behavior while using social media. This policy informs students about the school's behavioral expectations for student social media use, including Kaiser Permanente Bernard J. Tyson (KPSOM) or Kaiser Permanente (KP) hosted social media channels or personal, non-KPSOM, or KP-hosted channels. To view the full content of this policy, please visit the Student Social Media policy.

Student Withdrawals

See Student-Initiated Status Changes.

Tuition Refund

See Refund Policy.

Tuition, Fees, and Financial Aid

Tuition Waiver

The Kaiser Permanente Bernard J. Tyson School of Medicine will waive all tuition and fees for classes entering in the fall of 2020 through 2025. This waiver will be available for each class for all four years of enrollment. Medical school is expensive, and debt can impact students' future career choices and the type or location of their clinical practice. The School of Medicine has granted this waiver to minimize those concerns for its students. Students admitted to these cohorts will only be responsible for paying the \$100 accepted student registration deposit and any living expenses incurred while enrolled at the school.

Estimated Cost of Attendance, Fall 2025 to Spring 2029

Table 1 provides an overview of the estimated cost of attendance for the entire Doctor of Medicine (MD) program. Direct costs are charges billed to a student's account and paid directly to the school.

Indirect costs estimate personal and educational expenses that the school does not directly bill. Indirect costs include books, transportation, and other living expenses (e.g., rent and food). Although institutional grant aid may cover some indirect costs, students are responsible for paying them.

Equipment and Technology Requirements

KPSOM issues all students a computing device to secure access to Kaiser Permanente's proprietary systems, such as HealthConnect and the School of Medicine's Student Information System (SIS) and Learning Management System (LMS). The school also provides students with a mobile device for use during clinical rotations and other school events. All KPSOM-issued equipment is the school's property and subject to the school's acceptable use policies (see Information Technology).

Estimated Total Tuition and Fees for Degree Completion

KPSOM waived all tuition and fees for classes entering in the fall of 2020 through 2025. This waiver is available for all four years of students' enrollment. Of the charges listed in the previous section, students will be responsible for all indirect costs and USMLE licensing exam fees. The anticipated total cost of attendance for the entire Doctor of Medicine (MD) program is \$160,363.00.

TABLE 1 - ESTIMATED COST OF ATTENDANCE, 2025-2026 AY THROUGH 2028-2029 AY

Cost of Attendance ¹	25/26 AY	26/27 AY	27/28 AY	28/29 AY	Estimated Total
Weeks of Instruction	45	49	14	32	164
Direct Costs					
Acceptance Deposit ²	\$100.00	\$0.00	\$0.00	\$0.00	\$100.00
Tuition ³	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Student Tuition Recovery Fund (Non-Refundable) ⁴	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indirect Costs					
Disability insurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Health insurance	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Living Expenses	\$33,120.00	\$36,957.00	\$29,256.00	\$33,092.00	\$132,425.00
Transportation	\$3,780.00	\$2,143.00	\$4,332.00	\$5,604.00	\$15,859.00
USMLE Registration Fees	\$0.00	\$1,400.00	\$0.00	\$0.00	\$1,400.00
Misc. Personal Expenses	\$2,736.00	\$3,053.00	\$2,416.00	\$2,374.00	\$10,579.00
Total Cost of Attendance:	\$39,736.00	\$43,553.00	\$36,004.00	\$41,070.00	\$160,363.00

Required Licensing Examinations

Students attending KPSOM must pass Step 1 and Step 2 CK of the United States Medical Licensing Exam (USMLE) to fulfill graduation requirements for the Doctor of Medicine (MD) program. Exams are taken during the program's third year, as shown below. The fees listed below are subject to change and are available at nbme.org/students/examfees.html.

United States Medical Licensing Exam (USMLE) Fees	Amount
Step 1 (Beginning of Year 3)	\$700.00
Step 2 Clinical Knowledge (CK) (Mid-point of Year 3)	\$700.00

¹ Includes estimated 3% cost of living increase per academic year for room and board, registration fees, and miscellaneous educational expenses. Transportation is calculated using the standard IRS mileage rate.

² Non-refundable if the applicant withdraws acceptance after April 30, 2025.

³ Equipment and textbooks are included in tuition.

⁴ Effective April 1, 2024, the Student Tuition Recovery Fund (STRF) assessment rate will change from two dollars and fifty cents (\$2.50) per one thousand dollars (\$1,000) of institutional charges to zero dollars (\$0.00) per one thousand dollars (\$1,000) of institutional charges.

Student Tuition Recovery Fund

The State of California established the Student Tuition Recovery Fund (STRF) to relieve or mitigate economic loss suffered by a student in an educational program at a qualifying institution, who is or was a California resident while enrolled, or was enrolled in a residency program, if the student enrolled in the institution, prepaid tuition, and suffered an economic loss. Unless relieved of the obligation to do so, you must pay the state-imposed assessment for the STRF, or it must be paid on your behalf, if you are a student in an educational program, who is a California resident, or are enrolled in a residency program, and prepay all or part of your tuition. You are not eligible for protection from the STRF and you are not required to pay the STRF assessment, if you are not a California resident, or are not enrolled in a residency program.

It is important that you keep copies of your enrollment agreement, financial aid documents, receipts, or any other information that documents the amount paid to the school. Questions regarding the STRF may be directed to the Bureau for Private Postsecondary Education, 1747 North Market Blvd., Suite 225, Sacramento, California, 95834, (916) 574-8900 or (888) 370-7589.

To be eligible for STRF, you must be a California resident or are enrolled in a residency program, prepaid tuition, paid or deemed to have paid the STRF assessment, and suffered an economic loss as a result of any of the following:

- 1. The institution, a location of the institution, or an educational program offered by the institution was closed or discontinued, and you did not choose to participate in a teach-out plan approved by the Bureau or did not complete a chosen teach-out plan approved by the Bureau.
- 2. You were enrolled at an institution or a location of the institution within the 120 day period before the closure of the institution or location of the institution, or were enrolled in an educational program within the 120 day period before the program was discontinued.
- 3. You were enrolled at an institution or a location of the institution more than 120 days before the closure of the institution or location of the institution, in an educational program offered by the institution as to which the Bureau determined there was a significant decline in the quality or value of the program more than 120 days before closure.
- 4. The institution has been ordered to pay a refund by the Bureau but has failed to do so.
- 5. The institution has failed to pay or reimburse loan proceeds under a federal student loan program as required by law, or has failed to pay or reimburse proceeds received by the institution in excess of tuition and other costs.
- 6. You have been awarded restitution, a refund, or other monetary award by an arbitrator or court, based on a violation of this chapter by an institution or representative of an institution, but have been unable to collect the award from the institution.
- 7. You sought legal counsel that resulted in the cancellation of one or more of your student loans and have an invoice for services rendered and evidence of the cancellation of the student loan or loans.

To qualify for STRF reimbursement, the application must be received within four (4) years from the date of the action or event that made the student eligible for recovery from STRF.

A student whose loan is revived by a loan holder or debt collector after a period of noncollection may, at any time, file a written application for recovery from STRF for the debt that would have otherwise been eligible for recovery. If it has been more than four (4) years since the action or event that made the student eligible, the student must have filed a written application for recovery within the original four (4) year period, unless the period has been extended by another act of law.

However, no claim can be paid to any student without a social security number or a taxpayer identification number.

Refund Policy

Student's Right to Cancel

Students have the right to cancel their enrollment agreement for the Doctor of Medicine (MD) program, without any penalty or obligation, through attendance at the first class session or the seventh calendar day after enrollment, whichever is later. After the end of the cancellation period, students also have the right to cease enrollment at any time and receive a pro-rata refund (see <u>Tuition Refund</u>, <u>Withdrawal</u> policies).

Cancellation Procedure

Cancellation may occur when students provide written notice of cancellation at the address below. Students can submit their cancellations via mail or hand-deliver them to the Office of the Registrar.

Office of the Registrar Kaiser Permanente Bernard J. Tyson School of Medicine 98 S. Los Robles Ave Pasadena, CA 91101

The written notice of cancellation, if sent by mail, is effective when deposited in the mail properly addressed with proper postage. The written notification of cancellation need not take any form and, however expressed, is effective if it shows that the student no longer wishes to be bound by the enrollment agreement. If the student cancels their enrollment agreement, the school will refund the student any money they have paid to the school, less their \$100.00 accepted student registration deposit, and less any deduction for equipment not returned in good condition within 30 days after the notice of cancellation is received.

Withdrawal from the Program

Students may withdraw from the school at any time after the cancellation period (see <u>Withdrawal</u> Policy). Students who withdraw before completing 60 percent of the scheduled payment period are eligible for a pro-rata refund of any tuition paid to the school (see <u>Tuition Refund</u> policy). A payment period is defined as the start and end date of instructional activity covered by financial aid (e.g., semester). Any refund received will be less the \$100 non-refundable accepted student registration deposit and less any deduction for equipment not returned in good condition. The KPSOM will process the refund no later than 30 days after receiving the cancellation notice.

When determining a refund under this section, the school deems a student withdrawn from the Doctor of Medicine (MD) program when any of the following occurs:

 The student notifies the Kaiser Permanente Bernard J. Tyson School of Medicine of their withdrawal in writing or the date of their withdrawal, whichever is later.

- The Kaiser Permanente Bernard J. Tyson School of Medicine terminates the student's enrollment for failure to maintain satisfactory academic progress, failure to abide by the rules and regulations of the school, absences above the maximum set forth by the school, or inability to meet financial obligations to the school.
- The student fails to attend classes for thirty calendar days.
- The student fails to return from a leave of absence.

If the student completed less than 60 percent of the payment period, the Bursar uses the following three-step calculation to determine the refund due to the student.

		(Total of Institutional Charges (Tuition, Required Fees)
4	-	Non-Refundable Fees)
I	÷	Number of Days in Payment Period
	=	Daily Rate
		Daily Pata
		Daily Rate
2	Х	Number of Days Attended
	=	Amount of Tuition Earned
		Institutional Charges
		Institutional Charges
3	-	Non-Fundable Fees
3	-	Amount of Tuition Earned
	_	Refund Due Student

If the student completed more than 60 percent of the payment period, the KPSOM considers any tuition assessed earned in full, and the student is not eligible for a tuition refund.

Financing Your Education

The Senior Financial Aid Officer (SFAO) administers institutional and federal student aid, scholarships, student loans, and other financial aid resources. The SFAO manages student financial aid services, including but not limited to individual entrance and exit counseling sessions for incoming and graduating students.

Goal

Our goal is to provide students with excellent service, counseling, and resources to fund their medical education. We intend to graduate all students with minimal to no debt and support their financial well-being throughout their enrollment.

Federal Financial Aid (Title IV) Status

The school is in the preliminary stages of WASC Senior College and University Commission accreditation. Until the school achieves initial accreditation status, the school is ineligible to participate in Title IV of the Higher Education Act of 1965 (HEA), which includes administering federal student financial aid programs and Title VII programs of the Department of Health and Human Services. The Department of Education will assign the school a federal school code (OPEID) once it obtains eligibility to participate in Title IV federal student aid programs.

Financial Aid Programs

Institutional Grant Aid

KPSOM sets aside institutional funds to help students fund their medical education. Students must submit a CSS Profile application and supporting financial documents for themselves and their parents to be eligible. Upon receiving a completed application, the SFAO processes the application and provides each student with an estimated aid offer.

Students who matriculate into the school's MD/PhD program are awarded an MD/PhD stipend, which covers the cost of attendance for the MD portion of the program.

All institutional grant aid awards are contingent on continued full-time enrollment in the Kaiser Permanente Bernard J. Tyson School of Medicine. Students must immediately report any changes in their enrollment status to the Registrar.

Institutional grant aid for living expenses and the cost of the waived health insurance coverage may be considered taxable income by the Internal Revenue Service. **Students are strongly encouraged to consult a qualified tax professional to determine any tax implications.**

External Scholarships

Students are encouraged to apply for scholarships awarded by external providers. Websites such as <u>FastWeb</u> and the U.S. Department of Education provide access to scholarship databases to help students locate opportunities. The Association of American Medical Colleges (AAMC) maintains a <u>loan repayment and scholarship database</u>. Students may be eligible for many of the options listed. Also, the <u>American Medical Association</u> provides several fellowships and scholarships for medical students.

Several scholarship applications are also available and include features that match students with potential funding opportunities based on their needs and background. However, the school cautions students to avoid companies or organizations requiring a fee or making guarantees to help them

identify a specific amount of money in scholarship aid.

Students receiving external scholarships should immediately report these funds to the SFAO as they may reduce their eligibility for institutional grant aid or private student loans.

Private Student Loans

Private student loans are credit-based loans offered by a private lender. The terms and conditions of the loan differ by lender. Sallie Mae, a private lending institution, agreed to work with KPSOM students. Students who obtain private student loans to offset the cost of attendance must repay the loan amount in full, plus interest, less the amount of any refund. **Note:** Effective February 14, 2010, lenders of private education loans must collect from all borrowers a completed and signed <u>Private</u> <u>Education Loan Applicant Self-Certification Form</u> before disbursing a loan.

KPSOM Emergency Loan Program

KPSOM provides funds for short-term emergency loans, up to a maximum of \$2,000 per academic year, to assist students with temporary cash flow problems. Short-term loans are available only to students currently enrolled at the school. Students cannot obtain emergency loans between semesters. Students enrolled but not earning credits (e.g., auditing coursework) are not eligible for short-term loans. Once an application is complete and approved, emergency loan funds are typically available to the student within 3-5 business days.

Students must repay emergency loans by the start of the next semester, when the school receives additional funds (e.g., institutional aid, scholarship, or private loan) or as directed by the SFAO. The KPSOM does not assess interest on emergency loans.

Students interested in obtaining a short-term emergency loan should contact the Senior Financial Aid Officer (SFAO). The SFAO can assess your financial situation and determine if a short-term emergency loan is your best option. If, after meeting with the SFAO, you wish to move forward with an emergency loan, you may apply online via the <u>student portal</u>.

Student Aid Index (SAI)

The Department of Education's Student Aid Index (SAI) is a federal methodology calculation formula established by law. The SAI identifies how much money a student and family are expected to contribute to the student's education. The family's taxed and untaxed income, assets, and benefits (such as unemployment or Social Security) may be included in the calculation. Also considered are the size of the student's family and the number of family members attending college or career school during the year.

Financial Aid Packaging

The packaging process begins when the SFAO determines a student's SAI and financial aid eligibility. If applicable, the school's financial aid package is developed using financial resources such as institutional grant aid, scholarships, and private student loans. The general rule in packaging is that the student's total financial aid and other resources must not exceed the student's financial need (Need = Cost of Attendance [COA] minus Student Aid Index [EFC]). After completing the packaging process, students are issued a financial aid offer letter for review. Students gain access to the student portal before matriculation. They may physically accept, modify, or decline their offer of financial assistance within the student portal.

Financial Aid Offer Letter Components

- Financial Aid eligibility factors
- Cost of attendance
- Institutional grant aid, scholarships, and loan options
- Next steps
- Student responsibilities and disclosures
- Contact information

Disbursement of Financial Aid

Disbursement of any awarded institutional grant aid or private loan funds for which students are eligible is applied to student financial accounts twice per year in two equal payments. Eligible students receive a refund of any credit balance on their student accounts at the start of the fall semester and the mid-point of the academic year. Spring financial aid funds disburse when a student has completed the first half of the academic year, both in instructional weeks and credit hours.

KPSOM refunds all credit balances to students via electronic funds transfer (EFT). Students must enroll in direct deposit during the summer before the first term of classes.

Satisfactory Academic Progress (SAP)

Under federal regulations, students receiving Federal Financial Aid must be in good standing and maintain Satisfactory Academic Progress (SAP) toward their degree. The standards used to evaluate academic progress are cumulative. They include all student enrollment periods, including periods during which they did not receive federal financial aid funds.

To continue receiving institutional and federal financial aid at the school of medicine, students must demonstrate satisfactory progress toward graduation. Federal regulations require three measurements to determine SAP: qualitative, quantitative, and timeframe.

Qualitative – When evaluating satisfactory academic progress, the Senior Financial Aid Officer (SFAO) follows procedures established by the Student Progress and Promotion (SPP) Committee.

The school of medicine does not compute grade point averages using letter grades; therefore, students must achieve a minimum grade of Pass ("P") in all required courses and clerkships to demonstrate satisfactory academic progress. Final course grades may appear as Pass/Fail or Honors/Pass/Fail per the grading scale outlined in the course syllabus.

For additional information on the treatment of grades and courses, please view the <u>Satisfactory Academic Progress</u> policy.

Quantitative – Students must have an academic standing consistent with the school of medicine's curriculum and graduation requirements to maintain continued financial aid assistance. To meet graduation requirements, students must complete the prescribed course of study in all three phases of the MD curriculum.

To make satisfactory academic progress, students must have completed the first two years of the curriculum by the end of the third year of their initial enrollment. A semester-end review of all courses attempted and completed is conducted to determine if a student has met the criteria required to progress to the next phase of the curriculum.

Time Frame and Pace of Completion – The maximum period is the maximum number of years after initial enrollment a student may complete the school of medicine's courses/clerkships in full-time pursuit of a degree. The maximum time frames for completion of programs are:

School of Medicine Program	MD Component	Additional Component	Maximum Time to Graduation
MD	Four years	N/A	Six years
MD/Master's Degree	Four years	One year	Seven years
Approved Year-Long Research	Four years	One year	Seven years
MD/PhD	Four years	Four years	Ten years

Approved leaves of absence are excluded from the maximum time frame calculation.

Treatment of Repeated Coursework or Academic Year

Students may receive financial aid to repeat a course where they earned a failing grade or withdrew from any class or classes. Students can only use Financial aid funds to cover the first attempt to repeat a course. Under current financial aid guidelines, students who failed a course(s) and must repeat an entire year of the curriculum, including courses already passed, will be eligible for federal financial aid to repeat the required academic year. Students are only eligible to receive funding for the first repeat of an academic year.

Leave of Absence

Students on a leave of absence from the MD program cannot receive financial aid while on leave.

Dismissal or Withdrawal

Dismissed or withdrawn students no longer qualify for financial aid.

Appeal Process

Students not meeting financial aid SAP requirements (qualitative or time frame) may appeal to the SFAO for review. The SFAO will notify the student if they must complete the appeal process for aid reinstatement. The appeal must state the reasons for failing to meet SAP requirements, such as the circumstances that contributed to the student's failure to make satisfactory academic progress (e.g., the death of a relative, an injury or illness of the student, or other exceptional circumstances).

Financial Aid Probation

If an appeal for reinstatement of financial aid funding is approved, the SFAO places the student on financial aid probation. Students may receive one additional financial aid payment during the subsequent payment period. The student must demonstrate satisfactory coursework or progression to continue receiving financial assistance, as mandated by the SPP Committee.

Notification

The SFAO will notify students in academic difficulty of their continued financial aid funding status.

To view the full content of this policy, please visit Satisfactory Academic Progress.

Return of Financial Aid

When a student withdraws before the end of a payment period, the student may no longer be eligible for the financial aid funds awarded at the start of the academic year. Students withdrawing before completing 60 percent or more of a payment period may be required to return funds to the school.

Deferment of Student Loans

The Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) is an eligible institution that allows students to defer their existing federal student loan balances through an in-school deferment process. To request an in-school loan deferment, please see the instructions below.

Federal Student Loan - In-School Deferment Process

- 1. The student contacts their loan servicer and requests the In-School Loan Deferment form.
- To identify your loan servicer, log in to <u>studentaid.gov</u> with your Federal Student Aid ID and password. Scroll to the "My Loan Servicers" section or call the Federal Student Aid Information Center at 1-800-433-3243.
- 2. The student completes the form and emails it to the Office of the Registrar (kimberley.m.dekruif@kp.org).
- 3. The Registrar will process the form and email it to you once it is complete.
- 4. The student submits the form to their loan servicer/holder.

Private Education Student Loan - In-School Deferment Process

- 1. The student contacts their loan servicer/holder and requests the In-School Loan Deferment form.
- 2. The student completes the form and emails it to the Office of the Registrar (kimberley.m.dekruif@kp.org).
- 3. The Registrar will process the form and email it to you once it is complete.
- 4. The student submits the form to their loan servicer/holder.

Student Financial Services

The Office of Enrollment Support Services (ESS) provides financial services to all students who enroll in the KPSOM. ESS assists students by maintaining accurate student account records and communicating account charges, payments, and balances. In addition, ESS is responsible for managing all aspects of the student accounts, such as, but not limited to, the following services:

- Posting of institutional grant aid and private loans to students' accounts
- Processing of credit balance refunds
- Tuition refund calculations
- Repayment notifications
- Payment processing

Institutional Grant Aid, Scholarship, or Private Loans Funds

ESS posts institutional aid, scholarship, or private loan transactions on students' accounts in compliance with the schedule developed by the Office of Financial Aid. Should a credit balance exist on an account after all applicable charges are processed, ESS will refund the credit balance within 14 days.

Direct Deposit

KPSOM issues all credit balance refunds via direct deposit. Students must submit their banking information upon matriculation and update their direct deposit information should any changes occur.

Doctor of Medicine (MD)

The school of medicine leverages the values and capabilities of Kaiser Permanente, one of the nation's largest integrated healthcare systems and one of the world's highest-performing healthcare organizations, to prepare students for future-facing clinical practice and health system leadership. The educational program for the MD degree at the school of medicine lays the foundation for advancement across the continuum from undergraduate medical education to graduate residency training. Our curriculum uses a competency-based approach that integrates biomedical, clinical, and health systems sciences across all four years of training in a spiral fashion, revisiting content in increasing complexity.

Our innovative curriculum begins with an Early Immersive Experience in Year 1 and ends with a Residency Immersive Course in Year 4 that bookends courses, including required didactic courses, required clinical courses such as Longitudinal Integrated Clerkships (LICs), and Advanced Selectives (Sub-internships), as well as opportunities for Service-Learning and project-based work that is associated with the Scholarly Project, and elective courses for students to customize their curriculum to meet their individual needs.

The Four Threads

Four longitudinal threads across the four-year curriculum emphasize approaches and values the school considers essential for meaningful participation in high-functioning healthcare systems.

The four threads are Advocacy and Leadership; Equity, Inclusion, and Diversity; Health Promotion; and Interprofessional Collaboration.

The Degree

The Doctor of Medicine (MD) degree is earned by completing four years of professional study after completing undergraduate, pre-professional prerequisites at an accredited college or university in the United States or Canada.

Other Degrees

KPSOM provides opportunities for students to apply to degree programs they can complete in addition to the Doctor of Medicine (MD) degree. Students wishing to enroll in these programs must apply separately to the school of medicine and the additional degree program and receive admission to both. Programs may have varying application timelines.

MD/PhD Program

An MD-PhD program provides training in medicine and research. It is specifically designed for those who want to become physician-scientists pursuing research. Students must apply separately to the school of medicine and the additional degree program and be admitted to both programs. Please contact the Office of Admissions at mdadmissions@kp.org for further information on the MD-PhD application process.

California Institute of Technology (Caltech): Doctor of Philosophy (PhD)

KPSOM's MD-PhD program is designed for students interested in pursuing in-depth research to identify and bridge gaps to advance health. Students will typically perform summer research rotations

at the California Institute of Technology (Caltech) before, during, and after the first two years of medical school at the Kaiser Permanente Bernard J. Tyson School of Medicine. Subsequently, they will conduct their doctoral degree work in any of the multiple research areas at Caltech, ranging from bioengineering and biochemistry to computational and neural systems.

Upon completing their PhD dissertation, students return to KPSOM to finish the last two years of their MD studies. Students accepted to and enrolled in the MD-PhD program are subject to the policies and procedures of this catalog while participating in the MD portion of the MD-PhD program.

Master's Programs

Depending on the program, a master's degree typically involves an extra year of study after the third year of medical school. Students will have ample time to complete their clinical rotations and residency applications. Students must apply for these programs, typically in their second or third year of medical school. Financial aid may be available from the external institution.

University of California Los Angeles Fielding School of Public Health: Master of Public Health (MPH)

As one of the top ten public health schools and the number one public university in the country, the Fielding School of Public Health at the University of California, Los Angeles, has five academic departments: Biostatistics, Community Health Sciences, Environmental Health Sciences, Epidemiology, and Health Policy and Management. KPSOM students may apply for a Master of Public Health degree.

University of Southern California Sol Price School of Public Policy: Master of Health Administration (MHA)

University of Southern California's Sol Price School of Public Policy, one of the nation's top public policy schools, offers KPSOM students a chance to earn a Master of Health Administration. This degree program is designed for those interested in a career in healthcare leadership. The program offers healthcare management and policy training to address ongoing technology, behavioral science, economics, healthcare law, and finance issues. It is essential for doctors who want to become leaders within hospitals, health plans, medical practices, and community health organizations.

Transferability of Credits

Acceptance of the credits students earn in the Doctor of Medicine (MD) program to one of the external degree programs listed above is at the complete discretion of the receiving institution. For this reason, KPSOM encourages students to contact the external institution to determine if any of their earned school of medicine credit hours are eligible for transfer.

Graduate Medical Education

Graduation from the Kaiser Permanente Bernard J. Tyson School of Medicine with an MD degree does not guarantee placement in a residency program or eventual licensure. Obtaining a graduate medical education (GME) position, commonly known as an internship or residency, depends on many factors. GME programs evaluate candidates in areas that include but are not limited to curricular performance, licensing examination attempts and scores, interpersonal skills, and demonstration of leadership and scholarship. Candidates participate in a competitive process known as "The Match" to secure a GME position. This process primarily occurs through the National Resident Matching Program (NRMP) for positions offered by the Accreditation Council for Graduate Medical Education (ACGME) but may also include other "matches" for specific specialties or military GME positions.

Students must be familiar with and comply with all policies and requirements of The Match in which they participate. A "Match" offer is a legal, contractual obligation between the student and the program. Failure to abide by a "Match" obligation is a "Match" violation.

Some matching programs (e.g., NRMP) require the school to certify that students can begin their residency program on July 1 in their graduation year. To be certified, students must pass the USMLE Step 1 exam and be on a trajectory to meet all other graduation requirements before the NRMP certification deadline. Students who are certified and subsequently obtain placement but cannot start their program on July 1 will be required to contact the NRMP for a match waiver. Failure to request a match waiver could result in a match violation, as outlined in the NRMP's match participation agreement.

Licensure Requirements

Graduates of this program are eligible to participate in accredited postgraduate training programs across the United States. Specific requirements for initial medical licensure for all 70 states and U.S. territories are located on the Federation of State Medical Boards website at fsmb.org/step-3/state-licensure/.

Effective January 1, 2020, a Postgraduate Training License (PTL) must be obtained within 180 days after enrollment in an Accreditation Council for Graduate Medical Education (ACGME) accredited postgraduate training program in California. To obtain a California Physician's and Surgeon's License, graduates of approved medical schools must complete 36 months of board-approved postgraduate training with 24 months of continuous training in a single program to be eligible for licensure. Board-approved training programs include the Accreditation Council for Graduate Medical Education (ACGME) in the U.S. or the Royal College of Physicians and Surgeons of Canada/ College of Family Physicians of Canada (RCPSC/CFPC).

Additional information on the California licensure requirements, application process, and associated fees can be found at mbc.ca.gov/Applicants/Physicians and Surgeons/.

Educational Program Outcomes

Domain: Patient Care (PC)

Title: Information Gathering

Description: Gathers essential and accurate information about patients and their conditions through history-taking, which includes relevant interpersonal and structural factors that affect health, physical examination, clinical and population-level data, and diagnostic tests.

Title: Diagnosis and Plan

Description: Organizes, synthesizes, and interprets information from patients' records, history, diagnostic testing, and physical examination to construct a relevant differential diagnosis, a logical working diagnosis, and an effective management plan that includes attention to interpersonal and structural factors that affect health as appropriate.

Title: Verbal and Written Communication Within Healthcare Systems

Description: Filters, prioritizes, and conveys accurate information regarding the clinical encounter in an organized and comprehensive manner. The communication presents a cogent narrative in support of clinical reasoning, with attention to patient privacy/confidentiality and patient preferences, and that is tailored to the context and audience.

Title: Patient Collaboration

Description: Collaborates with patients in their health promotion, disease prevention, and/or treatment (HP/DP/T) by recognizing uncertainty; prioritizing the patients' wishes; considering structural factors and/or patient context; and respecting the patients' concerns and expectations. [Includes advanced communication skills such as: motivational interviewing, informed consent, intimate partner violence, breaking bad news, medical error disclosure, advanced care planning, DNR consent, negotiating a shared agenda/goals with discordant expectations/desires.]

Title: Urgent/Emergent Care

Description: Recognizes patients requiring urgent or emergent care and initiates evaluation and management.

Title: Transitions

Description: Works to ensure continuity of care during transitions between providers or settings, including handoffs and following up on patients' progress and outcomes.

Title: Technology and Digital Health Care

Description: Demonstrates appropriate selection and use of digital technologies to optimize clinical decision-making and treatment and effectively communicate with patients, families, communities, and the healthcare team.

Domain: Life-Long Learning (LLL)

Title: Uncertainty

Description: Recognizes uncertainty as a core principle of medicine, science, and systems by engaging in processes to assess, manage and maintain uncertainty, including the judicious identification, appraisal, and use of evidence.

Title: Self-Assessment and Growth

Description: Engages in reflection and informed self-assessment to inform professional identity and personal and professional development.

Title: Well-Being

Description: Integrates personal, community, and evidence-informed practices with one's own beliefs and values to further support health and well-being in self and others

Domain: Systems-based Practice (SBP)

Title: System Thinking and Design

Description: Applies systems thinking to develop and assess activities aimed at improving health and healthcare at the individual, organizational, community, and population health levels.

Title: Population Care Management

Description: Recognizes the need to use the triple aim (experience of care, health, and cost) to manage populations within a health system(s) or practice in addition to managing individual patients. Demonstrates appropriate sensitivity to patients, healthcare, and societal resources.

Title: Quality Improvement

Description: Applies concepts of quality and performance improvement aimed at improving patient and population health outcomes.

Title: Patient Safety

Description: Engages with safety interventions aimed at reducing patient harm.

Title: Leadership Change

Description: Applies leadership skill sets with the aim of creating innovation and change within healthcare systems.

Domain: Population and Community Health (PCH)

Title: Critical Consciousness

Description: Analyzes systems and structures that create health inequities for communities and populations and applies this knowledge toward community-centered solutions.

Title: Social Accountability

Description: Participates in activities aimed at addressing social and structural factors to reduce health-related inequities and affirm physician accountability to communities and populations.

Domain: Interprofessional Collaboration and Teamwork (IPC)

Title: Roles and Teamwork

Description: Uses knowledge of one's own role and roles of other health professionals and community agents, as well as effective teamwork to collaboratively assess and address the healthcare needs of patients and populations in interprofessional teams.

Title: Collegial Communication

Description: Communicates and interacts with colleagues, team members, and leaders, including other health professionals and community agents, in a responsive manner that creates a climate of mutual respect, inclusion, and ethical integrity.

Domain: Interpersonal and Communication Skills (ICS)

Title: Person-Centered Communication

Description: Demonstrates person-centered communication that incorporates humility, honesty, and empathy, when interacting with patients, families, and communities, with attention to values, health-literacy levels, and cultural and socioeconomic factors.

Title: Teaching

Description: Demonstrates effective teaching skills in presentations, group learning activities, and discussions with faculty and peers.

Domain: Professionalism (PR)

Title: Trustworthiness

Description: Demonstrates accountability, conscientiousness, truthfulness, and discernment in the care of patients, their families, and communities, as well as with colleagues and members of the healthcare team.

Title: Inclusion (Bias Mitigation and Affirming Difference)

Description: Articulates and demonstrates self-aware and inclusive practices that aim to dismantle systems of inequity by mitigating bias, affirming difference, and fostering belonging.

Title: Ethical Reasoning

Description: Recognizes, analyzes, and proposes solutions to ethical issues and challenges encountered in clinical care, interaction with communities, and/or research.

Domain: Medical Knowledge (MK)

Title: Deep Knowledge

Description: Demonstrates deep knowledge of the health sciences as they apply to advancement of the health of patients and communities.

Title: Scholarly Project

Description: Engages in a mentored scholarly project to deepen curiosity and foster participation in a community of scholars.

Professional Attributes

Below are the professional attributes (behaviors and attitudes) that KPSOM medical students are expected to develop. To ensure a systematic assessment of these attributes, each is represented in one or more Educational Program Outcomes (EPOs).

<u>Accountability:</u> A physician who demonstrates accountability accepts responsibility for one's own decisions and their effects on patient outcomes, then ensures appropriate follow-up. Additional accountability to one's colleagues is demonstrated through working well in teams, openly identifying and learning from one's own mistakes, and speaking up to support team members in their efforts for the same.

<u>Truthfulness:</u> A physician who demonstrates truthfulness consistently communicates actions and knowledge honestly and without deception by means of inclusion or omission.

<u>Conscientiousness:</u> A physician who demonstrates conscientiousness is prepared, careful, and thorough in attending to details and processes necessary to realize individual and team goals and ensure equitable outcomes.

<u>Discernment:</u> A physician who practices discernment is aware of the limitations of one's own knowledge, skills, biases, and attitudes and uses this awareness to continually identify areas for improvement and to seek help as needed.

Respect: A physician who practices respect seeks to understand and show due regard for the diverse perspectives, feelings, wishes, rights, and/or traditions of patients, colleagues, team members, and the communities they serve.

<u>Humility:</u> A physician who demonstrates humility asks questions and listens with the goal of arriving at a deeper understanding that benefits relationships, teamwork, and patient care. This physician embraces ambiguity and tensions between points of view with curiosity and actively listens to understand rather than only react and respond.

Admissions

Applies to students entering in the fall of 2026

Technical Standards

The Kaiser Permanente Bernard J. Tyson School of Medicine designed its curriculum to provide a general professional education leading to the MD degree and prepare students to enter graduate medical training in various specialties or subspecialties. The following technical standards are requirements for admission, promotion, and graduation in conjunction with the academic standards. The term "candidate" refers to candidates for admission to medical school and current medical students who are candidates for retention, promotion, or graduation. Candidates and current medical students must be able to achieve these standards with or without reasonable accommodations.

Fulfilling the technical standards for graduation from medical school does not guarantee that a graduate will be able to fulfill the technical requirements of any specific residency program.

- a. COMMUNICATION: Candidates must be able to comprehend, communicate, and document information in the English language and to communicate accurately and effectively with patients, family members, healthcare workers, and other professionals in healthcare settings, as well as with instructors, supervisors, classmates, and various health or educational team members in both clinical and classroom settings. This includes the ability to elicit, receive, and accurately interpret information from others; to collect, document, and convey relevant information to others; to understand and use healthcare terminology; and comprehend and follow directions and instructions. In addition, candidates must be able to accurately document patient records, present information in a professional and logical manner, and appropriately provide patient counseling and instructions to effectively care for patients or clients and their families.
- b. COGNITIVE ABILITY: Candidates must have the capacity to develop and refine critical thinking and problem-solving skills that are crucial for safe and effective medical practice. These processes involve capabilities to measure, quantify, calculate, question, analyze, conceptualize, reason, integrate, and synthesize information in order to make timely decisions reflecting sound clinical judgment, and to determine appropriate clinical actions. Candidates must additionally be able to find and use research-based evidence; to learn from other individuals; to comprehend, integrate, and apply new information; to make sound clinical decisions; and to communicate outcomes verbally and in writing. Candidates must be able to make measurements, calculate, and reason; and to analyze, integrate, and synthesize data rapidly, consistently, and accurately to problem-solve and ultimately make sound diagnostic and therapeutic judgments.
- c. OBSERVATION: Candidates must be able to collect, use, and interpret information from demonstrations, from diagnostic and assessment procedures and tools, and from all other modes of patient assessment in the context of laboratory studies, medication administration, radiologic studies, and all other patient care activities. In addition, candidates must be able to document these observations and maintain accurate records.
- d. **MOTOR:** Candidates must be able to perform physical examinations and diagnostic and therapeutic maneuvers necessary and required in the curriculum and of a future physician. Candidates must be able to respond to emergency situations in a timely manner and provide

or direct general and emergency care. Candidates must possess the physical endurance necessary for extended periods of activity that are required for safe and successful performance in classroom and clinical settings. Candidates must possess the ability to comply with all safety standards in all clinical settings, including but not limited to universal precautions. Candidates must be capable of moving within and between clinical treatment environments without compromising the safety of patients, members of the healthcare team, or others.

- e. BEHAVIORAL AND SOCIAL ATTRIBUTES: Candidates must possess the capacity to communicate effectively, respectfully, and with cultural humility to all individuals whom they encounter; and to demonstrate behaviors associated with compassion, respect and concern for others, integrity and ethical comportment, sound clinical judgment, and accountability for their responsibilities and actions. Candidates must be able to accept the supervision of an instructor and/or preceptor, to accept constructive criticism or feedback, and to modify behavior based on feedback. Candidates must demonstrate critical thinking in making sound clinical judgments and the ability to adapt quickly to rapidly changing situations and environments and to uncertain circumstances. Candidates must have the capacity to correctly judge when assistance is required and seek appropriate assistance in a timely manner. Candidates must be able to function cooperatively and efficiently with others. Candidates must possess the personal qualities of integrity, empathy, concern for the welfare of others, curiosity, and motivation. Candidates must possess the emotional maturity required for the full use of their intellectual abilities; the exercise of good judgment; and the prompt completion of all responsibilities associated with the diagnosis and care of patients. As medical education involves exposure to a wide variety of situations, candidates must be able to demonstrate resilience in both classroom and clinical settings and participate in self-help and interventions as appropriate.
- f. **LEGAL AND ETHICAL STANDARDS:** Candidates are expected to consistently exhibit professionalism, personal accountability, compassion, integrity, concern for others, and care for all individuals in a respectful and effective manner regardless of gender, gender identity, age, race, sexual orientation, religion, disability, or any other protected status. Candidates must understand and be able to comply with the legal and ethical aspects of the practice of medicine and maintain and display ethical and moral behaviors commensurate with the role of a physician in all interactions with patients, their families, faculty, staff, students, and the public. Individuals whose performance is impaired by abuse of alcohol or other substances are not suitable candidates for admission, promotion, or graduation. Candidates must be able to meet the legal standards to be licensed to practice medicine in the State of California. As such, candidates must detail in writing at the time of application any felony offense or disciplinary action to the school. If a conviction occurs after matriculation, students are required to inform the Senior Associate Dean for Student Affairs of any actions which might impair candidates' ability to obtain a medical license. Failure to notify the school may result in disciplinary action by the Student Progress and Promotion (SPP) Committee.

Equal Access to the School of Medicine's Educational Program

The school of medicine welcomes candidates with disabilities who may need accommodations. Consistent with Section 504 of the Rehabilitation Act of 1973, Title III of the Americans with Disabilities Act as Amended 2010, and California law, the school of medicine does not discriminate on the basis of disability. Candidates with questions about the technical standards, reasonable accommodations, or the accommodations process may email SOMdisability@kp.org. After matriculation, students can contact the Director of Academic Support and Advising and Disability

Access to pursue accommodations. Prior to consideration for admission, a candidate must attest that they have read the school's technical standards and can meet them with or without reasonable accommodation. In addition, students will review and sign the technical standards at the start of each academic year and when they return from a leave of absence.

Academic Requirements for Admission

Baccalaureate Degree Requirement

Kaiser Permanente Bernard J. Tyson School of Medicine requires all applicants to have obtained a bachelor's degree from a regionally accredited college or university in the United States or Canada in any area of study at the time of matriculation. Because a bachelor's degree is required to matriculate, "ability to benefit" students (students who do not have a high school diploma or high school equivalency certificate) are not eligible for admission.

Required and Recommended Premedical Courses

The KPSOM selected required and recommended premedical courses that align with the school of medicine's Mission, Vision, and Values. The requirements are based on consideration of expected knowledge of life and physical sciences, social sciences, and humanities, as well as reading and writing skills, problem-solving skills, and communication skills. The recommended courses are intended to prepare students to become culturally sensitive practitioners.

Examples of courses are listed within each category. The examples listed may not represent what is required or the options available through every applicant's college/university/institution.

Required Prerequisites for Admission to the School of Medicine:

- Behavioral/social science (e.g., psychology, sociology, ethnic studies, economics, anthropology): one-half academic year
- Humanities (e.g., history, English, literature, art, philosophy): one-half academic year
- General biology with laboratory: one academic year
- General inorganic chemistry or equivalent with laboratory: one academic year
- General physics with laboratory: one academic year

Recommended Courses and Subjects for Admission to the School of Medicine:

- Biochemistry
- Calculus
- Organic chemistry
- Statistics
- Introduction to public/population health and/or epidemiology
- Language other than English (e.g., Spanish, Mandarin, American Sign Language, etc.)

The school of medicine accepts Advanced Placement (AP) credit if the credits appear on the student's official transcript and the undergraduate institution awarded the student credit towards graduation. The KPSOM cannot accept credits earned at a prior institution through challenge examinations, achievement tests, and/or experiential learning credit to fulfill prerequisites.

Medical College Admissions Test (MCAT) Requirement

The Medical College Admission Test (MCAT) is required of all applicants. All applicants must present scores from tests taken no later than September 30 of the year before matriculation and no earlier than three years before matriculation into medical school.

Language of Instruction/English Proficiency

English is the language of instruction at the Kaiser Permanente Bernard J. Tyson School of Medicine. Candidates must be able to comprehend, communicate, and document information in English. Applicants whose native language is not English automatically demonstrate proficiency through their completion of a baccalaureate degree at a regionally accredited college or university in the United States or Canada. The Kaiser Permanente Bernard J. Tyson School of Medicine does not offer English as a Second Language (ESL) courses.

Admissions Process

The Admissions Committee establishes the criteria and procedures for the admission of medical students based upon the school of medicine's Mission, Vision, and Values. The committee will review and select qualified students for admission from the applicant pool. The process will stress a holistic review that comprehensively considers a candidate's attributes and likely indicators for success.

The steps in the admissions process are as follows:

- 1. AMCAS application received by the Office of Admissions
- 2. Secondary application sent to all qualified applicants
- 3. File reviewed for interview recommendation and forwarded to Review Chair
- 4. Candidates for interview selected
- 5. Interview conducted and assessments submitted to the Admissions Committee
- 6. Final admissions decisions made by the Admissions Committee
- 7. Candidates notified

Admissions Application

Applications must be submitted through the <u>American Medical College Application Service (AMCAS)</u>.

Documentation of every aspect of an applicant's qualifications will begin with a review of the AMCAS application, including information regarding personal attributes and experiences, and academic data. The letters of recommendation/evaluation will also be received through AMCAS and reviewed by the File Reviewer, Interviewer, and Admissions Committee.

Personal attributes essential to the committee's ability to best evaluate mission alignment and not found in the AMCAS data will be obtained through a secondary application, Multiple Mini Interviews

(MMIs), and a traditional one-on-one interview.

Assessment of candidates' personal attributes, along with their experiences and academic metrics, will occur through a review of all application materials and the interview. Committee members, file reviewers, and interviewers will be trained to assess the extent to which an applicant demonstrates the qualities sought for successful students.

All admissions decisions about an applicant, made by Kaiser Permanente Bernard J. Tyson School of Medicine and all other AMCAS medical schools, are updated regularly by AMCAS, which maintains a database on all applicants for the current year's entering class. Relevant national, state, and school-specific data are maintained by AMCAS and made available to all medical schools on a periodic basis. MCAT scores from all test administrations are also reported.

Application requirements through AMCAS include the following:

- 1. Personal statement/essay
- 2. Letters of recommendation that should address one or more of the following desirable candidate attributes:
 - Collaborative teamwork skills
 - Creativity and innovativeness
 - Critical thinking and problem-solving skills
 - Cultural sensitivity
 - Demonstrated leadership potential
 - Excellent communications skills
 - Integrity and high moral standards
 - Intellectual curiosity
 - Passion for medicine and healthcare motivation
 - Persistence and resilience
 - Receptivity to feedback
 - Reliability and accountability
 - Self-awareness

Candidates must choose one of these options to satisfy the school's letters of recommendation requirements:

- Committee Letter: A committee letter contains input from multiple recommenders, authored by a pre-health committee or a pre-health advisor, which may include individual letters as attachments.
- Three individual letters: An individual letter refers to a letter written by one writer; at least one of the three letters must be from the following:
 - faculty member
 - pre-health or academic advisor, post-baccalaureate or graduate program advisor, research mentor, or healthcare worker with whom the student has studied or worked
 - supervisor, manager, commanding officer, or equivalent from previous or current position of employment

Note: Unacceptable letters of recommendation include those from a government or political

official, a friend or family friend, or a family member. All letters should be signed and on official letterhead.

- 3. Student activities and experiences: A description of activities and experiences contributing to an understanding of the applicant, including but not limited to:
 - Athletics
 - Community service (e.g., AmeriCorps or other domestic community services)
 - Creative or other pursuits that made a difference for others
 - Employment outside of student life
 - Experiences that contributed to the community
 - Exposure to healthcare
 - Faith-based or other institutional work
 - Leadership
 - Military service
 - Peace Corps or other international service-related activity
 - Personal experiences that motivated entering healthcare
 - Research
 - Teaching assistantships
 - Volunteerism
 - Distance traveled, which includes personal experiences, obstacles, hardships, and challenges the applicant has overcome to reach this point in their education

Additional Requirements for Admission

Travel: Students may be required to travel throughout the Southern California region to Kaiser Permanente medical centers, office buildings, and affiliated and community clinics to fulfill their educational requirements. A candidate must be able to travel, either with their own vehicle or public transportation.

Background checks and drug testing: Criminal background checks and drug screening may be conducted as part of the process of admission, participation, promotion, and/or graduation.

International Students

Currently, the school of medicine can only accept applications from U.S. citizens, permanent residents, and Deferred Action for Childhood Arrival (DACA) recipients. Applicants must have a bachelor's degree from an accredited college or university in the U.S. or Canada. The school is currently unable to accept applications from international students.

Transfer Students

Due to its curriculum's complex and integrated nature, the Kaiser Permanente Bernard J. Tyson School of Medicine does not accept transfer or advanced-standing students. The school of medicine has not entered into an articulation or transfer agreement with any other college or university.

The Offer of Admission

In collaboration with the Admissions Committee, the Senior Associate Dean for Admissions and Equity, Inclusion, and Diversity has final responsibility for the number of offers of admission and the qualifications of accepted candidates. Admissions offers are extended on a rolling basis, with additional qualified applicants placed on a waitlist.

Offers of admission will be made by email, with an attached statement of conditions, followed by a letter and telephone call from the Senior Associate Dean for Admissions and Equity, Inclusion, and Diversity. In keeping with the <u>Association of American Medical Colleges (AAMC) "Traffic Rules,"</u> accepted candidates must respond within two weeks of receiving an offer of admission with their intent to accept or decline the offer. On or before April 30, all candidates can hold acceptance offers or waitlist positions from other schools or programs without penalty. For offers extended after April 30, each candidate has a maximum of five business days to respond to the offer, which may be reduced to two business days within 30 days of the start of orientation.

Accepted Student Registration Deposit

An accepted student registration deposit of \$100 is required to hold a position in the class. It can be refunded before May 1 if the student chooses not to attend Kaiser Permanente Bernard J. Tyson School of Medicine. All offers of admission are conditional upon receiving final transcripts and all other required information, including a satisfactory criminal background check.

Delayed Matriculation

The Office of Admissions considers requests for delayed matriculation on an individual basis.

Timetable for Admission

Admissions Task	
AMCAS application opens	May, 15 months before matriculation
Interviews begin	August
AMCAS application deadline	October 2
Rolling admissions offers begin	October 16
Secondary application/materials deadline	November 1
Student commitment deadline	May 30
Matriculation	July 1

Registration

KPSOM students are registered for classes by the Registrar's Office. Incoming students must satisfactorily complete all admissions requirements before registration and matriculation. These requirements include completing prerequisite coursework, receiving final official transcripts from all colleges/universities attended, required immunizations and health clearances, and a criminal background check.

Enrollment Agreement

All students must sign an enrollment agreement at the start of each academic year. This enrollment agreement provides incoming and continuing students information on critical policies, tuition and fees, etc. For additional information, please visit the Enrollment Agreement policy.

Notice Concerning Transferability of Credits and Credentials Earned at Our Institution

The transferability of credits you earn at the Kaiser Permanente Bernard J. Tyson School of Medicine is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the credits you earn in the Doctor of Medicine (MD) program is also at the complete discretion of the institution to which you may seek to transfer. If the credits that you earn at this institution are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all of your coursework at that institution. For this reason, you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending the Kaiser Permanente Bernard J. Tyson School of Medicine to determine if your credits will transfer.

Transfer Credit

KPSOM does not award transfer credit for coursework completed at another graduate medical or health professions school or credit for prior learning experience.

Credit Hour Policy

For courses taught via traditional lectures, laboratories, small group activities, teambased learning, independent study, or workshops, one credit hour is assigned for 30 hours of contact time.

One credit hour is assigned for 40 hours of clinical experience for experiential education.

Given that the pace of learning and studying is not identical for everyone, the KPSOM understands that actual time on task will vary from student to student.

The KPSOM applies this formula to instructional terms of any duration. An equivalent amount of time on task (i.e., contact time plus out-of-class student work) per credit hour is required for non-classroom-based activities such as laboratory or small group practicum, clinical clerkships/rotations, asynchronous or distance instruction, and other non-classroom modalities and delivery methods.

The calculation of credit hours will be rounded down to the nearest 0.5 credit hours per course. Calculations apply whether the course is delivered in person or online.

Full-Time Enrollment Status

A student enrolled in at least one course or clinical experience is considered a full-time student.

Time Frame/Pace of Completion

The maximum time frame is the maximum number of years after initial enrollment a student may complete the school of medicine's courses/clerkships in full-time pursuit of a degree.

The maximum time frames for completion of programs are:

School of Medicine Program	MD Component	Additional Component	Maximum Time to Graduation
MD	Four years	N/A	Six years
MD/Master's Degree	Four years	One year	Seven years
Approved Year-Long Research	Four years	One year	Seven years
MD/PhD	Four years	Four years	Ten years

The period a student was on an approved leave of absence will be excluded from the maximum time frame required to complete their program.

Student-Initiated Changes in Enrollment Status

Leave of Absence

A student may request a leave of absence (LOA) from the Doctor of Medicine (MD) program with the occurrence of a medical emergency or illness, personal or financial hardships, or military service. Students may also request an LOA to pursue approved research or another degree program during their studies. Students must be in good academic standing to be eligible for a leave of absence.

Students requesting an LOA must submit the appropriate form to the Senior Associate Dean for Student Affairs (or designee). If the LOA is approved, the change in enrollment status is reported to the Registrar and the student's registration is modified as follows:

Percentage of Course Completed	Action Taken
0–20%	The course is removed from the student's registration and will not appear on the transcript.
21–99%	The course is assigned a withdrawal (W) grade to indicate that the student withdrew from the course. Withdrawal grades appear on the transcript and count toward the total credit hours attempted by the student.
100%	The course is assigned the grade earned.

All students approved for a leave of absence greater than thirty calendar days must complete exit counseling with the Senior Financial Aid Officer before starting their LOA to determine the impact of the change to their enrollment status on their financial aid eligibility and student loan repayment status.

The Registrar will calculate if any institutional grant aid or private student loan funds received by the student must be returned to the Kaiser Permanente Bernard J. Tyson School of Medicine. See the Return of Financial Aid section of this catalog for additional information.

Students may request an LOA of up to two years in length, provided the LOA does not cause the student to exceed their program's time-to-completion policy. While on LOA, students retain limited

access to student resources, including the library, email, and computer systems. Students on leave of absence are ineligible to run for or hold student organization/club/class offices or participate in school-sponsored extracurricular activities.

The Senior Associate Dean for Student Affairs (or designee) determines the term and conditions of any leave. Depending on the LOA duration, curriculum changes or academic policies may occur that could impact academic requirements and affect a student's matriculation upon return from an LOA. The KPSOM makes every reasonable attempt to minimize the impact of such changes. If changes are known when the LOA is granted, the Senior Associate Dean for Student Affairs will include these revised requirements as part of the terms and conditions in the letter granting a leave of absence. Should these changes occur after leave has been granted, the student on leave will be informed of these changes and how they may affect their future matriculation in writing from the Senior Associate Dean for Student Affairs (or designee).

At a minimum of ninety calendar days before the end of the leave of absence period (or as directed by the Senior Associate Dean for Student Affairs), the student must submit written notification to the Registrar of their intention to return to the school. If an individual fails to submit their intent to return or a request for an extension by the agreed-upon date, or if the student fails to return to the Kaiser Permanente Bernard J. Tyson School of Medicine on the date directed by the Senior Associate Dean for Student Affairs, the student will be withdrawn from the school and required to reapply for admission. The entire content of this policy can be viewed in the Leave of Absence policy.

Voluntary Withdrawal

Students wishing to withdraw from the Doctor of Medicine (MD) program should submit a withdrawal request form via the student portal. Unless there are exceptional circumstances, the requestor must meet with the Senior Associate Dean for Student Affairs (or designee) to discuss the reason for the withdrawal and the exit process.

Once approved, the change in enrollment status is reported to the Registrar and the student's registration will be modified as follows:

Percentage of Course Completed	Action Taken
0–20%	The course is removed from the student's registration and will not appear on the transcript.
21–99%	The course is assigned a withdrawal (W) grade to indicate that the student withdrew from the course. Withdrawal grades appear on the transcript and count toward the student's total attempted credit hours.
100%	The course is assigned the grade earned.

All students withdrawing from the MD program must meet with the Senior Financial Aid Officer to complete exit counseling and determine the impact of the change to their enrollment status on their student loan repayment status. For additional information, please visit the <u>Withdrawal</u> policy.

Upon withdrawal, the Registrar calculates whether any institutional grant aid or private student loan funds received by the student must be returned to the Kaiser Permanente Bernard J. Tyson School of Medicine. See the Return of Financial Aid section of this catalog for additional information.

Re-admission

Students withdrawing "in good academic standing" are not assured of re-admission unless it is a part of the final decision or agreement between the Senior Associate Dean for Student Affairs, the Admissions Dean, the Dean, and the withdrawing student. This final decision or agreement must be in writing to be clear to all parties involved. Students granted re-admission following withdrawal in good academic standing usually re-enter at the beginning of the next academic year and register for all courses scheduled during the academic year of their withdrawal, including those previously completed and passed, unless so stipulated. Students who withdraw "not in good academic standing" must request re-admission through the Kaiser Permanente Bernard J. Tyson School of Medicine's regular admissions process unless otherwise stipulated.

Retention of Student Records

In accordance with the California Code of Regulations, Title 5, Section 71920, the Kaiser Permanente Bernard J. Tyson School of Medicine maintains the following items in a permanent file regardless of a student's enrollment or completion status.

- Written records and transcripts of any formal education or training, testing, or experience that are relevant to the student's qualifications for admission to the institution or the institution's award of credit or acceptance of transfer credits, including the following:
 - Verification of high school completion or equivalency or other documentation establishing the student's ability to do college-level work, such as successful completion of an abilityto-benefit test;
 - Records documenting units of credit earned at other institutions that have been accepted and applied by the institution as transfer credits toward the student's completion of an educational program;
 - c. Grades or findings from any examination of academic ability or educational achievement used for admission or college placement purposes;
 - d. All of the documents evidencing a student's prior experiential learning upon which the institution and the faculty base the award of any credit;
- 2. Personal information regarding a student's age, gender, and ethnicity if the student has voluntarily supplied that information;
- 3. Copies of all documents signed by the student, including contracts, instruments of indebtedness, and documents relating to financial aid;
- 4. Records of the dates of enrollment and, if applicable, withdrawal from the institution, leaves of absence, and graduation; and
- 5. In addition to the requirements of section 94900(b) of the Code, a transcript showing all of the following:
 - a. The courses or other educational programs that were completed, or were attempted but not completed, and the dates of completion or withdrawal;
 - b. Credit awarded for prior experiential learning, including the course title for which credit was awarded and the amount of credit:
 - c. Credit for courses earned at other institutions:
 - d. Credit based on any examination of academic ability or educational achievement used for admission or college placement purposes;
 - e. The name, address, website address, and telephone number of the institution.
- 6. For independent study courses, course outlines or learning contracts signed by the faculty and administrators who approved the course;

- 7. The dissertations, theses, and other student projects submitted by graduate students;
- 8. A copy of documents relating to student financial aid that are required to be maintained by law or by a loan guarantee agency;
- 9. A document showing the total amount of money received from or on behalf of the student and the date or dates on which the money was received;
- 10. A document specifying the amount of a refund, including the amount refunded for tuition and the amount for other itemized charges, the method of calculating the refund, the date the refund was made, and the name and address of the person or entity to which the refund was sent;
- 11. Copies of any official advisory notices or warnings regarding the student's progress; and
- 12. Complaints received from the student.

Curriculum Policies

Academic Honesty

See Academic Honesty.

Academic Workload and Duty Hours

Phase 1 Academic Workload

Required activities will not exceed 68 hours per week, including adequate time for self-directed and independent learning. The maximum time students may spend in required in-class activities per week is 26 hours per Phase 1 academic week, averaged over four weeks. Weekend activities or clinical experiences generally are not required in Phase 1 academic weeks.

Phase 2 and 3 Duty Hours

Duty hours must be limited to 80 hours per week in Phases 2 and 3, averaged over four weeks, including all in-house, overnight call activities. Students must be provided with one day free in seven from all educational and clinical responsibilities, averaged over four weeks, including all call activities.

Adequate time for rest and personal activities must be provided. This must be no less than eight hours between all daily duty periods.

On-Call Activities

The objective of in-house, overnight on-call activities is to provide medical students with continuity of patient evaluation and management experiences throughout a 24-hour period. In-house, overnight calls must occur no more frequently than every fourth night.

Continuous on-site duty hours, including in-house and overnight calls, must not exceed twenty-four consecutive hours. Students may remain on duty for up to four additional hours to participate in supplemental learning activities and maintain the continuity of medical and surgical care (i.e., hospital rounds) per the decision of their supervisor.

When students are called into a hospital from home, the hours the student spends in-house are included in the 80-hour limit. The clerkship director must monitor the demands of remote calls in their clerkships and make scheduling adjustments as necessary.

Adequate time for rest and personal activities must be provided. This must be no less than fourteen hours after an in-house, overnight call.

Please visit the <u>Academic Workload and Duty Hours</u> policy for additional information on monitoring and exceptions to this policy,

Clinical Supervision

Medical students in clinical learning situations involving patient care are appropriately supervised at all times to ensure patient and student safety; the level of responsibility delegated to students is appropriate to their level of training, and the activities supervised are within the scope of practice of the supervising health professional. To view the entire content of this policy, please visit Clinical Supervision.

Credit Hours

See Credit Hour Policy.

Electives

KPSOM supports students' participation in elective opportunities to supplement required learning experiences, facilitate exposure to a broad range of interests, and permit students to expand their learning of medical specialties that reflect their career and academic interests. To view the entire content of this policy, please visit <u>Electives</u>.

Formative Assessment and Feedback

The school of medicine's Curriculum and Education Policy (CEP) Committee ensures the assessment of each student and the provision of formal formative feedback early enough during each required course or clerkship to allow sufficient time for performance improvement. Formal feedback occurs at least at the midpoint of a course or clerkship. A course or clerkship shorter than four weeks provides alternate means by which students can measure their progress in learning. KPSOM delivers a range of formative assessments to improve student progress and assist in developing personalized self-improvement plans for achieving educational objectives and competencies. For the entire content of this policy, please visit Formative Assessment and Feedback.

Narrative Assessment

Students will receive formative and summative narrative assessments, including for their non-cognitive achievement, in required courses and clerkships when direct and focused educator-learner interaction occurs. Students will receive narrative feedback when educator-learner contact is consistent and sustained. For the entire content of this policy, please visit <u>Narrative Assessment</u>.

Non-Involvement of Providers of Student Health Services in Assessment and Promotion

KPSOM prohibits faculty members or post-graduate trainees responsible for medical student assessment or promotion from providing healthcare to medical students except in emergencies. Any provider of healthcare services to a medical student will not be involved in the academic or performance assessment or promotion of that medical student. To view the entire content of this policy, please visit Non-Involvement of Providers of Student Health Services in Assessment and Promotion.

Recording of Educational Sessions and Events

When appropriate, KPSOM may record educational sessions and events and make them available to faculty, staff, and students for several reasons, including, without limitation, educational purposes, quality improvement, and assessment. With limited exceptions, KPSOM prohibits students from recording audio or video from educational sessions and events. Students with disabilities should contact the <u>Disability Access Office</u> to request accommodations, including but not limited to the school's recording and captioning of educational sessions. To view the entire content of this policy, please visit <u>Recording of Educational Sessions and Events</u>.

Satisfactory Academic Progress

See Satisfactory Academic Progress.

Single Standard for Promotion and Graduation

KPSOM has a single standard for promoting and graduating all students enrolled in the Doctor of Medicine (MD) program. To view the full content of this policy, please visit <u>Single Standard for Promotion and Graduation</u>. See also <u>Standards for Promotion and Graduation</u>.

Student Challenge of Assessment Data and Grades

See Student Challenge of Assessment Data and Grades.

Student Corrective Action and Due Process

KPSOM facilitates the regular and comprehensive review of student performance data to inform and validate decisions regarding the fulfillment of academic and technical standards and adherence to standards of professionalism and conduct. These processes ensure due process for students facing adverse decisions. For additional information, please visit the <u>Student Corrective Action and Due Process</u> policy. See also <u>Promotional Decisions</u>, <u>Student Code of Conduct</u>.

Technical Standards

See Admissions, <u>Technical Standards</u>.

Timely Submission of Grades

It is critically essential that KPSOM informs medical students about their final performance in courses and clerkships to facilitate 1) student self-assessment of their progress towards becoming a physician, 2) institutional monitoring of student development and progress, and 3) student assistance programs.

Non-clinical course directors must submit their final grades to the Registrar's Office no later than two weeks (10 business days) following the last day of the course. Clinical course directors, such as clerkship directors, must submit their final grades no later than four weeks (20 business days) following the last day of the clerkship. For additional details on this policy, please access the <u>Timely Submission of Grades</u> policy.

Transfer Credit

See Admissions, <u>Transfer Students</u>, or the <u>Transfer Credit</u> policy.

Transfer Students

See Admissions, Transfer Students, or the Transfer Students policy.

Use of Library and Electronic Learning Resources

The Kaiser Permanente Bernard J. Tyson School of Medicine Library provides services and educational resources to support teaching, learning, and scholarship.

The library must foster an environment of inquiry, intellectual development, and access to information from all perspectives, even when topics are controversial. Library and electronic resources are purchased, created, and made available solely for members of the school's community. Library and electronic resources include both licensed and non-licensed materials. The library negotiates license agreements that stipulate terms that control access and usage of materials. Should members of the

KPSOM community violate these licensing terms, the licensors can temporarily suspend access for the entire school community or permanently revoke the license.

For additional details on the library services available, please see the <u>Library</u> section of this catalog. For the full content of this policy, visit <u>Use of Library and Electronic Learning Resources</u>.

Assessment and Grading

Assessment Methods

KPSOM believes that the validity of programmatic assessment is premised on multiple and multisource assessment data obtained over time and on the integrated use of both quantitative and qualitative data. Therefore, the KPSOM system of assessment is intended to aggregate a robust variety of assessment data types across the curriculum. The following list includes required assessment methods that will contribute to course grades and/or promotional and graduation decisions.

- 1. Examinations from the National Board of Medical Examiners (NBME)
 - a. Customized Assessment Services (CAS): KPSOM faculty will construct examinations to align with content in the Integrated Sciences courses, using multiple-choice questions developed by the NBME for this purpose.
 - b. Comprehensive Basic Sciences Examination (CBSE): This examination will be administered to KPSOM students at least once prior to their sitting for USMLE Step 1. The CBSE examination is constructed by the NBME with content and difficulty that is consistent with USMLE Step 1 examinations, allowing student performance on this examination to be correlated to subsequent USMLE Step 1 performance. While performance on the CBSE will not constitute any portion of a course grade, students will be required to sit for it as a requirement for promotion from Phase 2 to Phase 3.
 - C. Comprehensive Clinical Sciences Examination (CCSE): This examination will be taken by KPSOM students at least once before sitting for USMLE Step 2.

2. Objective Structured Clinical Examinations (OSCEs)

- a. End-of-course OSCEs: Integrated Sciences courses will use end-of-course OSCEs to assess knowledge and skills from basic science, clinical science, and health systems science content, and will serve as the primary assessment method for assessment of clinical science learning. Simulated encounters may include, but are not limited to, use of standardized patients and/or mannequin-based scenarios. Certain encounters will be followed in each case by peri-encounter tasks consisting of written work (e.g., note writing, ethical reasoning, explanations of management, other follow-up), oral presentations, and/or discussion with an assessor. Those portions of OSCE checklists representing generic behaviors within a common skill set will be made available on Elentra (the learning management system used by the school to maintain documents relevant to each course) to students for learning. Portions specific to the case scenario will not. By way of example only, students will be provided with a checklist for the behaviors of person-centered communication and questions appropriate for presentations of pain in general; they will not be provided with a checklist of symptom questions for acute lower abdominal pain in a reproductive-aged woman.
- b. **Progress OSCEs:** KPSOM uses a series of OSCEs designed to evaluate the development of knowledge and skills over time. The same exam, at the same level of difficulty, will be administered to a class one or two times each year to assess

equivalent knowledge and skills. Performance standards will progressively increase, with the final standards consistent with those of a graduating student ready for the first year of residency.

- 3. **Open-ended questions/essay examinations:** The Integrated Sciences and REACH courses will use open-ended question and/or essay examinations. This type of examination also may be used in other courses at the school's discretion. Rubrics for assessment will be available on Elentra.
- 4. Writing for reflection and perspective-taking: The REACH program, the Service-Learning segment of Health Systems Science, and the LIC will include, as part of student assessment, a writing for reflection and perspective approach to assessment. Rubrics for assessment will be available on Elentra. Within REACH, coaches will not be able to assess materials or performance of the students they are assigned to coach, but they will be able to assess materials and/or performance of other students who are not assigned to them for coaching.
- 5. **Oral Examination:** Oral examinations, typically case-based, are used in Phase 3 Integrated Sciences courses (e.g., the Intern Clinical Judgment Examination) and may be used in other courses.
- 6. Clinical trimester/end of clinical course assessments: Faculty supervising students over time in the care of patients will provide both ratings of specific skills (e.g., history taking, documentation) and comments derived from their observations or obtained through written forms and/or interviews with clerkship directors, other clinical course directors, or their designees. These will be obtained every trimester for year-long clerkships. All data will be recorded on common forms available on Elentra.
- 7. **Brief Clinical Observations:** Faculty who directly observe a student performing any discrete clinical task or skill, or an Entrustable Professional Activity (EPA), such as data gathering, physical examination, patient education, or a procedure, may produce an assessment, including written feedback to the student and a rating of the degree to which the faculty member helped the student to complete the task or skill.
- 8. Comprehensive Clinical Observation: KPSOM faculty include Expert Clinical Assessors of Student Performance (ECASP), a small group that will periodically observe student performance of multiple clinical skills in single encounters, provide ratings and written and/or verbal feedback on the different components required to perform each skill, and offer targeted feedback and teaching. ECASP faculty undergo dedicated and continued training in assessment of clinical performance. The rating forms used for Comprehensive Clinical Observations are available on and recorded in Elentra.
- 9. **Clinical documentation:** Students will complete clinical documentation, such as history and physical exam documents, progress notes, discharge summaries, prescriptions, and post-encounter summaries, in real and simulated clinical settings. Document assessments will be made using rubrics available on and recorded in Elentra.
- 10. **Multisource feedback:** Feedback on student performance will be solicited from others working in clinical and didactic settings with students, including other health professionals, peers, and/or patients, and interpreted using pre-established rubrics available on Elentra by supervising faculty and/or clerkship directors or other clinical course directors. These

include small group participation assessments in Integrated Sciences and REACH.

- 11. **Self-assessments:** Students will be required to complete a written self-assessment prior to each promotional decision on their progress by the SPP Committee. While the self-assessments will not contribute to a course grade, they may be used to inform the SPP Committee's consideration of the many factors that can determine a student's progress through the curriculum.
- 12. Licensing examinations: Students must pass the USMLE Step 1 and Step 2 CK examinations.
 - USMLE Step 1: Students who demonstrate readiness are encouraged to sit for USMLE Step 1 at the end of or shortly after the dedicated preparation period at the beginning of phase 3. Students must sit for USMLE Step 1 no later than December 31 of the third year/the first year of Phase 3. Students must pass USMLE Step 1 before sitting for USMLE Step 2. Students are encouraged to sit for the USMLE Step 1 exam before the first day of the Advanced Clinical Knowledge Training (ACKT) course. MD/PhD students must complete USMLE Step 1 before beginning the MD/PhD portion of their program.
 - USMLE Step 2: Students who demonstrate readiness, based on Comprehensive Clinical Sciences Examination performance and performance on practice examinations during the ACKT Course, are encouraged to sit for USMLE Step 2 at the end of or shortly after completion of the ACKT. Students will be required to sit for USMLE Step 2 no later than March 31 of the third year/the first year of Phase 3.

Student readiness for Step 1 and Step 2 is overseen by the Strategic Academic Success (SAS) Team. Based on student performance on "practice" exams, prior performance in the school's curriculum, and other personal factors, the SAS Team may advise students to delay their planned exam date due to the risk of failure of either Step 1 or Step 2. Students not advised by the SAS Team to delay their planned exam date but want to extend the deadline must submit their request and rationale with a proposed new examination date to the Student Progress and Promotion (SPP) Committee at least one month before the deadlines above.

- 13. **Peer assessments:** Students will provide assessments of their peers in team-based learning and other activities as determined by the school. Completion of peer assessments may be a requirement for course passage.
- 14. **Projects:** The KPSOM curriculum includes various projects in specific required and elective courses. These will be assessed by course faculty according to rubrics aligned with the learning objectives of the project.

Examinations for Remediation or Conditional Pass Grades

Examinations may be included in structured remediation plans issued by the SPP Committee in response to one or more grades of Fail, or two or more grades of Conditional Pass.

If a student receives a single grade of Conditional Pass, the Strategic Academic Success (SAS) Team and the Course Director will collaborate to develop a structured plan that may include

examinations. The SAS Team will communicate to the student and the chair of the SPP Committee in writing the plans for satisfactory achievement of course expectations after a single grade of Conditional Pass.

Content:

- Remediation examinations will assess course-level learning objectives with similar breadth and rigor as the initial examination.
- A draft of the remediation examination, if institutionally developed (or its blueprint in the case of the NBME Customized Assessment Services examination), will be submitted by the course director to the Office of Assessment and Evaluation for review and approval prior to administration.

Timing and scheduling:

- Examination(s) taken to address a single CP grade will be scheduled in consultation with the course director, SAS Team, and the Office of Assessment and Evaluation, no later than the start of the subsequent phase of the curriculum.
- The timing of remediation examinations that are included in remediation plans from the SPP Committee will be specified in the plan.
- Whenever possible, designated time within REACH weeks (Fridays) should be used to administer remediation examinations.

Failure of a remediation examination:

• Failure of any remediation examination or of any examination administered to address a Conditional Pass grade will automatically be elevated for review by the SPP Committee.

Course Grades

Grade		Description
Н	Honors	Student has exceeded all performance expectations for the course. This grade is only applicable to specified clinical courses.
Р	Pass	Student has met all performance expectations for the course.
СР	Conditional Pass	Student has met most, but not all, performance expectations for the course. One or more deficiencies have been identified. Upon satisfactory completion of remediation, the course grade will convert to CP/P. If remediation is unsatisfactory, the course grade will convert to CP/F.
F	Fail	Student has demonstrated critical deficiencies or has failed to remediate a Conditional Pass successfully.

Administrative Grades

"Administrative grades" refer to circumstances where students were either not registered for the entirety of the course for credit or did not attempt all mandatory coursework and assessments.

Grade		Description		
AU	Audit	The student completed a course without the benefit of assessment or a final grade. Audited courses cannot count toward graduation requirements. Once enrolled in a course for credit, a student may not request to change their enrollment status to audit.		
	Incomplete	 An incomplete "I" is a temporary grade given at the course director's discretion when illness, necessary absence, or other reasons beyond the student's control prevent completion of course requirements by the scheduled end of the class. Incomplete grades may be given only in the following circumstances: The student's work to date is passing. Attendance has been satisfactory through at least 60% of the course. An illness or other extenuating circumstance legitimately prevents the completion of required work by the due date. Required work may reasonably be completed in an agreed-upon period and does not require the student to retake any portion of the course. An incomplete grade is not given as a substitute for a failing grade. The incomplete grade is not based solely on a student's 		
		failure to complete work or as a means of raising their grade by doing additional work after the grade deadline.		
IP	In-Progress	An In-Progress grade is assigned at the end of the first semester for courses spanning two semesters. The In-Progress grade is replaced with the final grade earned upon completion of both semesters of the course.		
M	Missing	A missing "M" grade is a temporary grade that the Registrar inputs if a student's grade is unavailable by the deadline for grade submission. An "M" grade is replaced by the grade earned in the course once submitted by the course director. "M" grades should not be used in place of an Incomplete "I" grade.		
W	Withdrawal	A withdrawal from a course or clerkship may be permitted in the event of illness or other personal circumstances or when a student is placed on a leave of absence prior to completing a course. Students must request approval from the Senior Associate Dean for Student Affairs, who will review the request with the course chair and the Registrar. If a withdrawal is approved, the withdrawal is recorded on the transcript by the Registrar. A student cannot withdraw to avoid failing a course or clerkship.		

Grade Reports

When course or clerkship directors submit official final grades, the Registrar posts the grades on the student portal. Official grade reports and unofficial transcripts are available on the student portal throughout the academic year.

Grade Changes

Grades submitted by course directors at the end of the term are final. Grades will not be modified because of a revision of judgment by the instructor or a second trial (e.g., a new examination, additional work undertaken or completed after submission of the final grade, or a repeat of the course). Grades may only be changed due to an error made during the grading process, by grade appeal, as a result of remediation, or if a student was assigned an incomplete grade and has since fulfilled the course requirements.

The course director is the only individual who can change a grade. Grade corrections or appeals must occur by the end of the subsequent term.

Final Grade and Summary Narrative Comment Appeal Process

Kaiser Permanente Bernard J. Tyson School of Medicine ("KPSOM") strives to maintain the highest academic standards for its students. Formative and summative assessment of knowledge, skills, and behaviors as defined in the KPSOM Educational Program Outcomes (EPOs) is necessary to demonstrate that students meet these academic standards.

Permissible Bases for Appeal

Only final course grades and, if applicable, associated narrative comments may be appealed through this formal process. However, students remain free to discuss interim course assignment grades and assessments (e.g., quiz scores, exam scores, Objective Structured Clinical Exams) with applicable course faculty or the Course Director or base an appeal of a final grade on the grade awarded to an interim course assignment.

An initial grade appeal must be based on one or more than one of the following factors:

- 1. An error in the computation of the grade;
- 2. Failure to follow course policy or grading standards as outlined in the course syllabus;
- 3. Misleading or inaccurate information contained in narrative comments associated with a final course grade.
- 4. Students whose number of absences exceeds the course standard as outlined in the course syllabi may appeal a Conditional Pass or Fail grade if the absences were due to a health issue or personal/family emergency. Documentation must be provided to support the appeal.

Impermissible Bases for Appeal

A faculty member's decision not to grade, or to penalize the grade of, an assignment submitted past the submission deadline or an assignment submitted in a manner inconsistent with course instructions unless that decision contradicts the course policy as noted in the course syllabus.

Complaints alleging discrimination or harassment based on a protected characteristic, such as race, color, sex, age, religion, sexual orientation, national origin or ethnic origin, or disability, or complaints

of sexual harassment are not governed by this policy. Complaints of this nature should be submitted using the procedures outlined in the <u>Non-Discrimination</u>, <u>Harassment-Free Environment</u>, and <u>Non-Retaliation Policy</u>, <u>Positive Learning Environment and Student Mistreatment Policy</u>, or <u>Prohibition of Sexual Misconduct</u>, Sex Discrimination, Sexual Harassment, and Retaliation Policy.

Initial Grade Appeal

An appeal of a final course grade and, if applicable, associated narrative comments must be submitted within five (5) business days of receipt of an email notification that a final course grade was posted to the Student Portal and/or Learning Management System. Students must use the submission process outlined in the Grade Appeal section of the Registrar's Office website. No initial grade appeals will be considered outside prescribed timeframes or for students who did not follow proper communication channels.

The applicable Course Director(s) must review and respond to an initial grade appeal within ten (10) business days of the initial appeal deadline.

Final Grade Appeal

Within five (5) business days following written notification to the student of the outcome of their initial grade appeal, the student may appeal the decision to the Senior Associate Dean for Medical Education (SADME). A final appeal is not a re-hearing of the initial appeal but a limited review of the original process and decision. Final appeals are only permitted if the student can demonstrate the following:

- Bias in the initial appeal process;
- New, material, and documentable evidence that was not available at the time of the Course Director's decision and that would likely alter the outcome;
 - Note: Information available to the student but not provided as part of their initial appeal is not considered "new."
- Procedural error that unfairly affected the decision-making process.

Upon receipt of a final appeal, the SADME will convene and chair an ad hoc Appeals and Grievance Review Group, which consists of members of the teaching faculty, including course directors.

Members of the ad hoc Appeals and Grievance Review Group must recuse themselves from evaluating a student's academic status in case of a conflict of interest. Conditions defining the need for recusal are outlined in the <u>Recusal from Discussions and Decisions on Medical Student Advancement Policy</u>.

The Senior Associate Dean for Medical Education will render and communicate a final decision to the student within ten (10) business days of receipt of the final appeal.

The decision of the Senior Associate Dean for Medical Education is final.

Timeline Extensions

The school will make every attempt to uphold the timelines referenced above. If timelines need to be extended, an updated timeline will be communicated to the student in writing.

Medical Student Performance Evaluation (MPSE) Generation and Appeal Policy

The MSPE is a summary letter of evaluation intended to provide residency program directors with an honest and objective summary of a student's salient experiences, attributes, and academic performance.

Contents of the MSPE

The content of the MSPE is specified by the American Association of Medical Colleges (AAMC). Students write the Noteworthy Characteristics section of the MSPE in concert with the Office of Student Affairs. Information regarding leaves of absence, adverse action(s) imposed on the student by KPSOM, and lapses in professional behaviors must be reported. Reasons for leaves of absence are described with sensitivity to student confidentiality and with student input, as appropriate. Reported adverse action(s) contain formal disciplinary actions against a student, including probation, suspensions from the program, dismissals overturned on appeal, Student Code of Conduct violations, or other disciplinary actions voted for reporting in the MSPE by the Student Progress and Promotion (SPP) Committee. Recurrent or singly egregious unprofessional behaviors will be addressed in the Professional Performance section of the MSPE and may be reported in the Academic Progress section. In situations of remediated clerkships, both the initial and remediated clerkship grades and summary narrative comments are reported.

Generation of the MSPE

KPSOM adheres to the format and content specified by the AAMC and the National Resident Matching Program's Match Participation Agreement for Medical Schools. The Associate Dean for Assessment and Evaluation confidentially prepares the MSPE with oversight from the Senior Associate Dean for Medical Education.

Students have an opportunity to review the MSPE for factual accuracy before release. Factual, grammatical, or inaccurate inclusion errors may be addressed to the Office of Assessment and Evaluation. During this factual review, students cannot edit clerkship grades or narrative summary narrative comments. Final grades or narrative summary comments must be addressed within the timelines outlined in the Final Grade and Summary Narrative Comment Appeal Process.

The MSPE becomes a permanent part of the student's academic record upon graduation.

Addendums to the MSPE

Once released to ERAS, the AAMC stipulates that the content of the original MSPE cannot be edited. An addendum may be added at a later date to reflect new information about student performance, either academic or professional, or student progress in the program that has occurred after the initial release.

Before the Match, at the discretion of the Student Progress and Promotion (SPP) Committee, KPSOM will submit to ERAS MSPEs with addendums in cases of course failures, adverse action(s) imposed on the student by KPSOM, lapses in professional behaviors, and/or improvements in professional behaviors previously noted on the MSPE to be deficient.

MSPE and Addendum Appeals

Enrolled students may appeal to request another MSPE writer or may appeal component(s) of their MSPE, or any addendum that they feel has not been fairly composed or written. Students may not use the Final Course Grade and Summary Narrative Comments Appeal Policy to appeal course/clerkship grades or narrative summary comments that were not appealed when issued.

The appeal must be filed within three (3) business days of notification that the MSPE is available for review to meet the deadline for the release of the MSPE.

An appeal to an addendum for currently enrolled students must also be filed within three (3) business days of notification that the addendum is available for their review.

Timeline Extensions

The school will make every attempt to uphold the timelines referenced above. If timelines need to be extended, an updated timeline will be communicated to the student in writing.

Promotional Decisions

Assessment and performance data used in promotional decisions

To ensure appropriate consideration of relevant information on each student's performance, the following data are used in determinations of readiness for promotion and graduation.

- Didactic and clinical course grades, required and elective (recipient: SPP Committee)
- Results of licensure examinations (recipient: SPP Committee)
- Other curricular data on student learning and performance (recipient: Competency Committee)
- Findings and recommendations from the Learning Environment and Professionalism Committee (recipient: SPP Committee)
- Determinations by Competency Committee regarding student progress with respect to KPSOM educational program outcomes and relevant documentation within the student's electronic portfolio (recipient: SPP Committee)
- Student selected self-assessments and individualized learning plans (ILP) (recipient: Competency Committee)

The Assessment and Evaluation Office oversees input and reporting of student performance data in the Student E-Portfolio in accordance with the KPSOM Data Governance Policy. The E-Portfolio centralizes and meaningfully aggregates performance data. It also includes learning artifacts generated by individual students. The E-Portfolio facilitates self-regulated and self-directed learning as supported through the coaching relationship, and aids in determining progress toward achievement of educational program outcomes.

Students are required to reflect upon formative and summative assessments on an ongoing basis to create and maintain ILPs that address areas of strength, areas for improvement, goals, and resources to help attain their goals. The ILPs are real-time, formative documents. The full ILP is not part of the academic record and is not reviewed by the Competency Committee or the SPP Committee. However, students may submit portions of their ILPs to demonstrate their ability to self-reflect, respond to feedback, and develop learning goals, as pertinent to relevant KPSOM educational program outcomes and Professionalism Attributes.

Promotion determination process

A. Goals of the promotion process and responsibility and preparation of the SPP Committee

Students' promotion within the KPSOM curriculum is based upon satisfactory progress toward attainment of the KPSOM educational program outcomes, adherence to standards of professionalism and student conduct, passing required didactic and clinical courses, and passing promotional and licensure examinations. Continued fulfillment of the technical standards is also required throughout the curriculum. See the following policies and documents for additional information:

- Single Standard for Promotion and Graduation
- Student Corrective Action and Due Process
- Faculty Handbook

B. Timing of the promotion process by SPP Committee

Each student will be reviewed for determination of fitness for promotion or graduation on the following schedule:

- 1. End of Year 1/beginning of Year 2
- 2. End of Year 2/beginning of Year 3
- 3. Midway through the fourth year (no later than January 15; provisional decision on graduation)

All students who are determined to be on track for graduation at the third review will be certified for the Match, the automated national process for pairing medical residents with residency programs (if they have entered it). This does not include students applying to early match programs; those students will be reviewed shortly before the certification deadline for the specific early match program.

C. Steps of the promotion process

Judgments from the LEAP and Competency Committees, along with data from promotional and licensure exams and grades provided by the Office of Assessment and Evaluation, are used to inform the decision of the SPP Committee. Before the regularly scheduled meetings of the SPP Committee, the Competency Committee, and the LEAP Committee prepare and submit their recommendations to the SPP Committee.

The Competency Committee is an advisory committee to the SPP Committee, charged with making determinations of attainment of KPSOM educational program outcomes to the promotional and graduation determinations of the SPP Committee. The committee's work is supported by the Office of Assessment and Evaluation. Members of the Competency Committee undergo training on unconscious bias, programmatic and holistic assessment, KPSOM educational program outcomes and milestones, the sources and types of assessment data produced within the curriculum, best practices in group decision-making, and categories of decisions, among others.

Step 1—Determinations of attainment of EPOs and their milestones

KPSOM educational program outcomes fall into two groups with respect to the processes for the determination of attainment.

Group 1: EPOs for which data originates in more than one concurrent course, or originates from at least one course and one or more assessments outside of courses (e.g., Progress OSCE). The decision to include an EPO in the Competency Committee process for each phase will be made by the CEP, based on the recommendation of the Assessment,

Curricular Evaluation, and Improvement Subcommittee as to the suitability of the body of evidence for that EPO for holistic review and judgment. The Competency Committee makes judgments on the attainment of this group of EPOs.

Group 2: EPOs, which are learned and assessed to the "advanced developing" (graduation level) outcome within a single course (e.g., Scholarly Project) or a single longitudinal series of courses (e.g., Critical Consciousness and Social Accountability in Service-Learning; Health and Well-being in REACH). Aspirational milestones for these EPOs may be attainable through selectives, electives, or non-curricular activities.

Attainment of Group 1 EPOs and their milestones: Screening Review by the Office of Assessment and Evaluation

EPO portfolios meeting the following criteria will be automatically assigned a rating of "#1 or #2 (Progressing at advanced level toward competency OR progressing toward competence):

- At least 1 rating of this EPO falls
 - o within the final trimester or quarter of Phase 1 or Phase 2 OR
 - o within the third quarter of Phase 3, year 3 OR
 - o within the first quarter or last quarter of available data in Phase 3, year 4;
- Of the ratings available for this EPO in the final trimester or quarter, 75% or more are at or above the expected milestone level;
- Of the ratings available for this EPO in the final trimester or quarter, all ratings are at least higher than the expected milestone immediately preceding phase.*
- No ratings at any time for this EPO since the last review was "behavior requiring corrective response;"
- No judgment at any review to date for the attainment of the milestones of a given EPO was "progressing with concern" or "insufficient progress toward competence;"
- Since the last review. Narrative comments "of concern" are those which:
 - o suggest or state that the student is not performing at the expected level,
 - offer no further information to confirm that the gap was fully addressed by the end of the phase or
 - o offer information to confirm that the gap remained until the end of the phase and
- Additionally, an EPO may be submitted for committee review or directly to the SPPC at the discretion of the Associate Dean of Assessment and Evaluation for sufficient cause.

*So, for example, in the review of a Phase 2 dashboard, where the expected milestone at the end of the phase is <mid-developing>, 75% or more of ratings are < middeveloping> or higher, and all ratings are <between early and mid-developing> or higher.

Attainment of Group 1 EPOs and their milestones: Competency Committee Review
The Competency Committee will perform an independent review on EPO portfolios not
meeting one or more of the criteria described in the Screening Review. At the Phase 3, year 3
review only, the Competency Committee will also review EPO portfolios with 2 or more ratings
above the expected milestone since the last review to determine attainment of "progressing at
an advanced level."

The Competency Committee meets and makes its determinations at least two weeks before the promotional meeting of the SPP Committee. In preparation for meetings of the Competency Committee, the EPO portfolios not meeting all criteria in the screening process are independently reviewed by two members of the Competency Committee, who determine, based on holistic review of all relevant and available evidence, whether the student has attained the appropriate milestone for each outcome. The holistic review shall integrate both narrative and quantitative data and consider the following in arriving at a final determination: the amount and specificity of data, multiplicity of data sources, experience and training of raters and assessors, and trajectory of learning over time.

For each educational program outcome, each reviewer will assign one of the following ratings:

- **#1. Progressing at an advanced level toward competence:** The evidence indicates that the student has attained a more advanced milestone than expected for their level of training.
- **#2. Progressing toward competence:** The evidence indicates that the student has attained the expected milestone for their level of training.
- **#3. Progressing toward competence with the additional need for monitoring:** The evidence indicates that the student has attained most but not all elements of the expected milestone for their level of training. The student is capable of and responsible for collaborating with their REACH coach and/or other individuals to develop an individual learning plan to fully meet the expected milestone.
- **#4. Insufficient progress toward competence:** The evidence indicates that the student has made insufficient progress and will require a structured and monitored remediation plan requiring involvement of individuals in addition to their coach that must be successfully completed with return to expected progression.

Where both reviewers assign the portfolio either a #1 or #2 rating, their decision will stand without further discussion and is provided to the SPP Committee.

Where one or both reviewers assign either a #3 or #4 rating, the reviewers will meet to further discuss, with the following outcomes:

If the reviewer pair's final determination is that the student's performance merits a rating of #1 or #2, that decision will be noted with an explanation of the discrepancy and the basis for the final determination. The chair of the Competency Committee will review these decisions and explanations and determine whether full committee review is warranted.

If the reviewer pair's final determination is that the student's performance merits a rating of #3 or #4, the full Competency Committee will review the rating. The Competency Committee will also provide recommendations for the focus of an individualized learning plan or the components of a structured remediation plan.

In circumstances where the Competency Committee cannot reconcile rating discrepancies, the determination shall be escalated to the SPP Committee for final determination.

Once finalized, all ratings and recommendations will be communicated to the SPP Committee. As part of the promotional decision-making process for students receiving a rating of #3 or #4, the SPP Committee will be responsible for affirming recommendations for ILPs or structured remediation plans, set the expectations and timelines for these plans, and monitor for appropriate completion. Determinations regarding remediation are conducted by the SPP Committee.

Attainment of Group 2 EPOs and their milestones

Attainment of milestones and graduation level competency of Group 2 EPOs is assumed when the student receives a passing grade or higher in the course, which individually or as part of a longitudinal series requires the attainment of the expected milestone to pass the course AND is the only course or longitudinal series to assess that EPO. In some cases, students may have the opportunity to demonstrate attainment of the aspirational milestone level through subsequent coursework done for courses that do not explicitly assess that EPO. In this case, the student should submit supporting evidence from the subsequent course to the course director of the course, which requires a demonstration of the graduation milestone ("advanced developing"). The course director may submit a recommendation to the Competency Committee for the designation of aspirational performance, which will be considered at the next full meeting of the committee.

Step 2—The Learning Environment and Professionalism Committee (LEAP): promotional decisions and communication

The LEAP Committee addresses all issues of student conduct and professionalism and will communicate findings relevant to promotional decisions to the SPP Committee. For additional information about processes, see the Faculty Bylaws for a description and charge of the LEAP Committee Faculty Bylaws (Section 1).

Step 3—The Student Progress and Promotion (SPP) Committee: promotional decisions and communication

The SPP Committee reviews and monitors the development and performance of each KPSOM student on an ongoing and as-needed basis, considering determinations of the Competency Committee, findings from the LEAP Committee, and grades and licensure examinations provided by the Office of Assessment and Evaluation. Its promotional decisions are based on the evaluation of the fulfillment of technical standards, the attainment of educational program outcomes and milestones, adherence to standards of professionalism and conduct, course grades, and licensure examinations.

For purposes of promotional decisions, the SPP Committee may assume candidacy for promotion (i.e., the rating #1-Promotion) without presentation of the EPO portfolio by OAE when the Competency Committee decisions are as follows:

- 30% or fewer of ratings of all rated EPOs for the student during that the review is "Progressing with the additional need for monitoring."
- No ratings of any rated EPO during the review of the student are "Insufficient Progress toward competence."
- For any EPO rated "Progressing with a need for additional monitoring," no prior review for the student has resulted in "progressing with additional need for monitoring" or "Insufficient Progress toward competence."

In any circumstance, the SPP Committee may request the presentation of one or more of any student's EPO portfolios.

The SPP Committee assigns one of four determinations:

- 1. **Promotion**: The student moves into the next phase of training with usual supervision and expectations.
- Promotion with concern: The student moves into the next phase of training with remediation plans and/or supervision beyond that usually provided at their level of training.
- 3. **Promotion withheld**: The student does not move into the next phase of training and must repeat specific courses or entire curricular phases.

4. Dismissal.

As part of the promotional decision-making process for students receiving a rating of #2 or #3, the SPP Committee will be responsible for determining next steps, up to and including mandatory leave of absence. The SPP Committee is responsible for developing structured remediation plans, setting the expectations and timelines for these plans, and monitoring for appropriate completion.

Students who have met or exceeded the milestones for each educational program outcome, who have no record of behavior resulting in corrective response or dismissal by LEAP, who continue to meet the technical standards, and who have earned at least a grade of Pass or Conditional Pass/Pass in all clinical and didactic courses and who have sat for required licensure examinations to date will be automatically promoted to the next phase of training.

All other students will be individually reviewed by the SPP Committee. See the following policies and documents for additional information:

- Single Standard for Promotion and Graduation Policy
- Student Corrective Action and Due Process Policy
- Faculty Bylaws (Section 1)

Decisions Affecting Advancement in the Curriculum Outside of Scheduled Promotional Decisions

As-needed reviews

The SPP Committee may conduct as-needed reviews of a student at any time, to the extent information on student performance reasonably suggests or demonstrates the need for academic remediation or disciplinary action or addressing other concerns.

The Office of Assessment and Evaluation will bring to the attention of the SPP Committee any student who has received grades consistent with one or more of the patterns identified below. Matters related to standards of professionalism and student conduct are first heard by the LEAP Committee, which will determine the need for as-needed review by the SPP Committee.

As-needed SPP Committee review of individual student performance will be required in any of the following circumstances:

- Failure to meet the criteria for passing a course within the specified time frame after a grade of Conditional Pass
- One or more Conditional Pass grades
- One or more Fail grades
- Failure to meet the criteria within the specified time frame for remediation of a determination of Promotion with Concern
- Upon recommendation from the LEAP Committee
- In addition, all course and clerkship directors will be queried in advance of the end-of-semester SPP meeting about any student(s) deemed to be at risk for failure of a year-long course at the mid-point of the course for review by the SPP Committee.
- Failure of a licensing examination

Guidelines for academic notice, repeat of academic semester or year, or dismissal

The SPP Committee will place a student on academic notice when they meet any of the following criteria:

- One or more Conditional Pass grades
- A minimum of one Fail grade
- A finding of Promotion with Concern
- Failure of a licensing examination
- Other circumstances presenting material concern in the assessment of the SPP Committee

Students placed on academic notice for reasons of a grade or promotional finding will remain on academic notice until they have satisfactorily corrected the grade or promotion finding and have completed one additional semester without additional difficulties. Students will be required to earn a grade of Pass or Conditional Pass/Pass in all required clinical and didactic courses prior to taking the Step 1 licensing exam.

Students placed on academic notice for failing a licensing examination must submit a detailed plan of their preparation for retaking the examination. (This plan should be submitted to the Director of Academic Support and Advising for review by the Strategic Academic Success Team). Students failing a licensing examination will be required to retake the examination within 10-12 weeks of the original examination date unless there are exceptional circumstances. Failure to adhere to the plan for preparation for retaking the examination may result in a requirement to appear before the SPP Committee to explain the lack of progress.

Academic notice does not have to be administered in the last semester of medical school.

Students placed on academic notice for circumstances presenting material concern by the determination of the SPP Committee will remain on academic notice until they have satisfied the conditions set forth by the SPP Committee in the communication regarding the decision for academic notice.

The SPP Committee will strongly consider requiring the student to repeat the academic semester or year when they:

Fail one or more Integrated Sciences Courses

- Fail the REACH Course in Phase 1 or Phase 2
- Fail one clerkship in Phase 1 or Phase 2
- Fail to remediate a failed Integrated Science Course within the required timeframe in Phase 1 or Phase 2
- Receive a Conditional Pass in two or more Integrated Sciences Courses in Phase 1 or Phase
- Fail two courses in Year 3 or fail two courses in Year 4
- Fail one sub-internship or required advanced clinical course
- Fail to meet the criteria within a specified timeframe for remediation of a determination of Promotion with Concern

The SPP Committee will strongly recommend a year-long leave of absence when a student:

• Fails the same licensing examination twice.

The SPP Committee will strongly consider dismissal when a student:

- Fails two or more Integrated Sciences Courses in the first two years of the curriculum
- Fails two or more clerkships in the first two years of the curriculum
- Fails a course that they have previously failed
- Fails two times to meet the criteria within a specified timeframe for remediation of a determination of Promotion with Concern
- Fails the same licensing exam three times

The SPP Committee will also strongly consider requiring the student to repeat the academic semester or year and/or dismissal when recommended by the LEAP Committee.

Interruptions of and Non-Linear Progression in the Curriculum

From time to time, students may experience interruptions of their curriculum due to personal circumstances (e.g., illness, life events), the requirements of external degree programs (e.g., MD-PhD; MD-MHA; MD-MHSE; MD-MPH), disciplinary actions, failure to meet criteria for promotion or graduation, or something similar. The school's Office of Student Affairs' options for addressing such interruptions depend on several factors, including the semester(s) involved and the total duration of the absence, whether continuous or intermittent. Grade decisions of I or W will be assigned, based on the standard course criteria.

See the following policies and documents for additional information:

- Leave of Absence Policy
- External Degree Program

Graduation Requirements

To qualify for graduation, by the time of the scheduled SPP Committee review midway through the student's fourth year, students must meet graduation level milestones for each KPSOM educational program outcome, demonstrate continued adherence to the technical standards and Student Code of Conduct, earn at least a grade of Pass in all didactic and clinical courses, and pass the USMLE Step 1 and Step 2 CK examinations. If at any time it is determined to be impossible for a student to complete these requirements for reasons other than the interruptions described above, the student

will be placed on an involuntary leave of absence pending dismissal in accordance with SPP Committee procedure.

See Single Standard for Promotion and Graduation for additional information.

Requirements for Certification for the National Residency Match Program

Students must pass USMLE Step 1 and USMLE Step 2 CK examinations and be on trajectory to meet all other graduation requirements prior to the National Residency Match Program deadline to be certified for Match participation.

Licensing Examinations

The United States Medical Licensing Examination (USMLE) is a two-step examination for medical licensure in the United States. It is sponsored by the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners (NBME). The USMLE program supports medical licensing authorities and physicians in the United States through the development, delivery, and continual improvement of high-quality assessments across the continuum of physicians' preparation for practice.

The USMLE assesses an examinee's ability to apply knowledge, concepts, and principles and demonstrate fundamental patient-centered skills. These skills constitute the basis of safe and effective patient care. Healthcare consumers throughout the nation enjoy a high degree of confidence that doctors who have passed both steps of the USMLE have met a common standard.

Successful completion of the USMLE Step 1 and Step 2 Clinical Knowledge (CK) examinations are requirements for graduation from the school of medicine.

USMLE Step 1

Students who demonstrate readiness are encouraged to sit for USMLE Step 1 at the end of or shortly after the dedicated preparation period at the beginning of Phase 3. Students will be required to sit for USMLE Step 1 no later than December 31 of the third year/the first year of Phase 3. Students must pass USMLE Step 1 before sitting for USMLE Step 2. Students are encouraged to sit for the USMLE Step 1 exam before the first day of the Advanced Clinical Knowledge Training (ACKT) course.

USMLE Step 2 (CK)

Students who demonstrate readiness, based on Comprehensive Clinical Sciences Examination performance and shelf performance during the ACKT course, are encouraged to sit for USMLE Step 2 at the end of or shortly after completion of the ACKT. Students will be required to sit for USMLE Step 2 no later than March 31 of the third year/the first year of Phase 3.

MD Curriculum, Students Entering in Fall 2025

Required Courses, Phase 1, Year 1

Fall 2025 Semester			
Subject/Course Number	Course Title	Scale	Credits
EIE 100	Early Immersive Experience	P/CP/F	2.0
HSS 101A	Service-Learning 1A	P/CP/F	0.5
IS 100	Integrated Sciences 1	P/CP/F	9.5
LIC 101A	Longitudinal Integrated Clerkship 1A	P/CP/F	1.0
REACH 101A	REACH 1A	P/CP/F	1.0
	Fall	Semester, Phase 1 Total:	14.0
Spring 2026 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 101B	Service-Learning 1B	P/CP/F	0.5
IS 160	Integrated Sciences 2	P/CP/F	12.5
LIC 101B	Longitudinal Integrated Clerkship 1B	P/CP/F	1.0
REACH 101B	REACH 1B	P/CP/F	1.0
	Spring	Semester, Phase 1 Total:	15.0
		Phase 1 Total:	29.0

Required Courses, Phase 2, Year 2

Fall 2026 Semester Subject/Course Number	Course Title	Scale	Credits
HSS 201A	Service-Learning 2A	P/CP/F	0.5
IS 200	Integrated Sciences 3	P/CP/F	8.5
LIC 210A	LIC: Family Medicine/Internal Medicine 2A	H/P/F	2.0
LIC 220A	LIC: Obstetrics/Gynecology 2A	H/P/F	2.5
LIC 230A	LIC: Pediatrics 2A	H/P/F	2.0
LIC 240A	LIC: Surgery 2A	H/P/F	2.5
LIC 250A	LIC: Psychiatry 2A	H/P/F	2.0
LIC 260A	LIC: Emergency Medicine 2A	H/P/F	1.0
REACH 201A	REACH 2A	P/CP/F	1.0
	Fall Semes	ter, Phase 2 Total:	22.0
Spring 2027 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 201B	Service-Learning 2B	P/CP/F	0.5
	Colvido Loairinig 25	1 / 01 /1	0.5
IS 250	Integrated Sciences 4	P/CP/F	7.5
			7.5
IS 250	Integrated Sciences 4	P/CP/F	7.5 2.5
IS 250 LIC 210B	Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B	P/CP/F H/P/F	7.5 2.5 2.5
IS 250 LIC 210B LIC 220B	Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B	P/CP/F H/P/F H/P/F	7.5 2.5 2.5 2.5
IS 250 LIC 210B LIC 220B LIC 230B	Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B	P/CP/F H/P/F H/P/F H/P/F	7.5 2.5 2.5 2.5 2.5
IS 250 LIC 210B LIC 220B LIC 230B LIC 240B	Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B	P/CP/F H/P/F H/P/F H/P/F	7.5 2.5 2.5 2.5 2.5 2.5
IS 250 LIC 210B LIC 220B LIC 230B LIC 240B LIC 250B	Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B LIC: Psychiatry 2B	P/CP/F H/P/F H/P/F H/P/F H/P/F	
IS 250 LIC 210B LIC 220B LIC 230B LIC 240B LIC 250B LIC 260B	Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B LIC: Psychiatry 2B LIC: Emergency Medicine 2B REACH 2B	P/CP/F H/P/F H/P/F H/P/F H/P/F H/P/F H/P/F	7 2 2 2 2 2 2 1

Required Courses, Phase 3

Semester	Course Title/Category	Scale	Credits	Weeks
Fall	ACKT 300: Advanced Clinical Knowledge Training	P/F	0.5	4
Fall	IS 300A: Integrated Sciences 5A	P/F	1.0	2
Fall	REACH 300A: REACH 3A	P/F	1.0	1
Spring	IS 300B: Integrated Sciences 5B	P/F	0.5	1
Spring	REACH 300B: REACH 3B	P/F	1.0	2
Fall or Spring	CS 300.1 – 300.2: Advanced Clinical Selective (FM or IM)	H/P/F	5.0	4
Fall or Spring	CS 305.1 – 305.24: Advanced Clinical Selective (Student's Choice)	H/P/F	4.0 - 5.0	4
Fall or Spring	CS 310.1 – 310.5: Critical Care Selective	H/P/F	5.0	4
Fall or Spring	CS 315.1: Neurology Rotation (Two-Week Required)	P/F	2.0	2
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective	P/F	2.5	4
	Phase 3, Year	ar 3 Total:	22.5 - 23.5	28
Years 3 or 4				
Semester	Course Title	Scale	Credits	Weeks
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives	P/F	16.0	16
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives or	P/F	5.0 - 8.0	8
I all of Spring	HSS 300.1 – 350.16: Health Systems Science Selective	[7]	3.0 - 0.0	0
Fall or Spring	RS 400: Scholarly Project ⁵	P/F	6.0	
Fall or Spring		<u> </u>	6.0 27.0 - 30.0	
	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029)	<u> </u>	27.0 - 30.0	
	RS 400: Scholarly Project ⁵ Phase 3, Years 3	<u> </u>		28
Year 4 (Fall 20	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title IS 400A: Integrated Sciences 6A	Scale P/F	27.0 - 30.0 Credits 0.5	28 Weeks 1
Year 4 (Fall 20 Semester	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title	Scale P/F P/F	27.0 - 30.0 Credits	28 Weeks 1
Year 4 (Fall 20 Semester Fall	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title IS 400A: Integrated Sciences 6A	Scale P/F	27.0 - 30.0 Credits 0.5	Weeks 1 1 1
Year 4 (Fall 20 Semester Fall Fall	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A	Scale P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0	Weeks 1 1 1 1
Year 4 (Fall 20 Semester Fall Fall Spring	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B CS 499: Residency Immersive	Scale P/F P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	28 Weeks 1 1 1 2
Year 4 (Fall 20 Semester Fall Fall Spring Spring	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B	Scale P/F P/F P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0	28 Weeks 1 1 1 1 2 4
Year 4 (Fall 20 Semester Fall Fall Spring Spring Spring	RS 400: Scholarly Project ⁵ Phase 3, Years 3 (28, Spring 2029) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B CS 499: Residency Immersive	Scale P/F P/F P/F P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	4 28 Weeks 1 1 1 1 2 4 4 4 14

⁵ Students enrolled in the MD/PhD program are not required to complete RS 400 – Scholarly Project since they will be completing a dissertation as part of their PhD degree requirements at Cal-Tech.

Required Credit Hours for the MD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.0
Phase 2 (Year 2)	44.5
Phase 3 (Years 3 and 4)	61.5 – 65.5
Total Required for Degree:	135.0 - 139.0

Required Credit Hours for the MD/PhD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.0
Phase 2 (Year 2)	44.5
Clinical Continuation ⁶	4.0
Phase 3 (Years 3 and 4)	55.5 - 59.5
Total Required for Degree:	133.0 - 137.0

⁶ MD/PhD students are required to complete LIC 270 – MD/PhD LIC Continuation during each year of their PhD program at Cal-Tech.

MD Curriculum, Students Entering in Fall 2024

Required Courses, Phase 1, Year 1

Fall 2024 Semester			
Subject/Course Number	Course Title	Scale	Credits
EIE 100	Early Immersive Experience	P/CP/F	2.0
HSS 101A	Service-Learning 1A	P/CP/F	0.5
IS 100	Integrated Sciences 1	P/CP/F	9.5
LIC 101A	Longitudinal Integrated Clerkship 1A	P/CP/F	1.0
REACH 101A	REACH 1A	P/CP/F	1.0
	Fall Se	mester, Phase 1 Total:	14.0
Spring 2025 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 101B	Service-Learning 1B	P/CP/F	0.5
IS 160	Integrated Sciences 2	P/CP/F	12.5
LIC 101B	Longitudinal Integrated Clerkship 1B	P/CP/F	1.0
REACH 101B	REACH 1B	P/CP/F	1.0
	Spring Se	mester, Phase 1 Total:	15.0
		Phase 1 Total:	29.0

Required Courses, Phase 2, Year 2

Fall 2025 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 201A	Service-Learning 2A	P/CP/F	0.5
IS 200	Integrated Sciences 3	P/CP/F	8.5
LIC 210A	LIC: Family Medicine/Internal Medicine 2A	H/P/F	2.0
LIC 220A	LIC: Obstetrics/Gynecology 2A	H/P/F	2.5
LIC 230A	LIC: Pediatrics 2A	H/P/F	2.0
LIC 240A	LIC: Surgery 2A	H/P/F	2.5
LIC 250A	LIC: Psychiatry 2A	H/P/F	2.0
LIC 260A	LIC: Emergency Medicine 2A	H/P/F	1.0
REACH 201A	REACH 2A	P/CP/F	1.0
	Fall Semes	ter, Phase 2 Total:	22.0
Spring 2026 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 201B	Service-Learning 2B	P/CP/F	0.5
IS 250	Integrated Sciences 4	P/CP/F	7.5
LIC 210B	LIC: Family Medicine/Internal Medicine 2B	H/P/F	2.5
LIC 220B	LIC: Obstetrics/Gynecology 2B	H/P/F	2.5
LIC 230B	LIC: Pediatrics 2B	H/P/F	2.5
LIC 240B	LIC: Surgery 2B	H/P/F	2.5
LIC 250B	LIC: Psychiatry 2B	H/P/F	2.5
LIC 260B	LIC: Emergency Medicine 2B	H/P/F	1.0
REACH 201B	REACH 2B	P/CP/F	1.0
	Spring Semes	ter, Phase 2 Total:	22.5
		Phase 2 Total:	44.5

Required Courses, Phase 3

Semester	Course Title/Category	Scale	Credits	Weeks
Fall	ACKT 300: Advanced Clinical Knowledge Training	P/F	0.5	4
Fall	IS 300A: Integrated Sciences 5A	P/F	1.0	2
Fall	REACH 300A: REACH 3A	P/F	1.0	1
Spring	IS 300B: Integrated Sciences 5B	P/F	0.5	1
Spring	REACH 300B: REACH 3B	P/F	1.0	2
Fall or Spring	CS 300.1 – 300.2: Advanced Clinical Selective (FM or IM)	H/P/F	5.0	4
Fall or Spring	CS 305.1 – 305.24: Advanced Clinical Selective (Student's Choice)	H/P/F	4.0 - 5.0	4
Fall or Spring	CS 310.1 – 310.5: Critical Care Selective	H/P/F	5.0	4
Fall or Spring	CS 315.1: Neurology Rotation (Two-Week Required)	P/F	2.0	2
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective	P/F	2.5	4
	Phase 3, Ye	ar 3 Total:	22.5 - 23.5	28
Years 3 or 4				
Semester	Course Title	Scale	Credits	Weeks
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives	P/F	16.0	16
Fall or Caring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives or	P/F	5.0 - 8.0	8
Fall or Spring	USC 200 1 250 16: Health Systems Science Solective	F /F	3.U - 0.U I	0
	HSS 300.1 – 350.16: Health Systems Science Selective		0.0 0.0	
Fall or Spring	RS 400: Scholarly Project ⁷	P/F	6.0	4
Fall or Spring	·	<u> </u>		
	RS 400: Scholarly Project ⁷	<u> </u>	6.0	
	RS 400: Scholarly Project ⁷ Phase 3, Years 3	<u> </u>	6.0	28
Year 4 (Fall 20	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028)	or 4 Total:	6.0 27.0 - 30.0	28
Year 4 (Fall 20 Semester	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028) Course Title	or 4 Total:	6.0 27.0 - 30.0 Credits	28 Weeks
Year 4 (Fall 20 Semester Fall	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028) Course Title IS 400A: Integrated Sciences 6A	Scale P/F	6.0 27.0 - 30.0 Credits 0.5	Weeks 1
Year 4 (Fall 20 Semester Fall Fall	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A	Scale P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5	Weeks 1 1 1 1
Year 4 (Fall 20 Semester Fall Fall Spring	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B	Scale P/F P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5 0.5	28 Weeks 1 1 1 2
Year 4 (Fall 20 Semester Fall Fall Spring Spring	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B	Scale P/F P/F P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5 0.5 1.0	28 Weeks 1 1 1 2
Year 4 (Fall 20 Semester Fall Fall Spring Spring Spring	RS 400: Scholarly Project ⁷ Phase 3, Years 3 (27, Spring 2028) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B CS 499: Residency Immersive	Scale P/F P/F P/F P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	4 28 Weeks 1 1 1 1 1 2 4 4 4

⁷ Students enrolled in the MD/PhD program are not required to complete RS 400 – Scholarly Project since they will be completing a dissertation as part of their PhD degree requirements at Cal-Tech.

Required Credit Hours for the MD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.0
Phase 2 (Year 2)	44.5
Phase 3 (Years 3 and 4)	61.5 – 65.5
Total Required for Degree:	135.0 - 139.0

Required Credit Hours for the MD/PhD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.0
Phase 2 (Year 2)	44.5
Clinical Continuation ⁸	4.0
Phase 3 (Years 3 and 4)	55.5 - 59.5
Total Required for Degree:	133.0 - 137.0

⁸ MD/PhD students are required to complete LIC 270 – MD/PhD LIC Continuation during each year of their PhD program at Cal-Tech.

MD Curriculum, Students Entering in Fall 2023

Required Courses, Phase 1, Year 1

Fall 2023 Semester			
Subject/Course Number	Course Title	Scale	Credits
EIE 100	Early Immersive Experience	P/CP/F	2.0
HSS 101A	Service-Learning 1A	P/CP/F	0.5
IS 100	Integrated Sciences 1	P/CP/F	9.5
LIC 101A	Longitudinal Integrated Clerkship 1A	P/CP/F	1.0
REACH 101A	REACH 1A	P/CP/F	1.0
	Fall Se	mester, Phase 1 Total:	14.0
Spring 2024 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 101B	Service-Learning 1B	P/CP/F	0.5
IS 160	Integrated Sciences 2	P/CP/F	12.5
LIC 101B	Longitudinal Integrated Clerkship 1B	P/CP/F	1.0
REACH 101B	REACH 1B	P/CP/F	1.0
Spring Semester, Phase 1 Total:			
		Phase 1 Total:	29.0

Required Courses, Phase 2, Year 2

Fall 2024 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 201A	Service-Learning 2A	P/CP/F	0.5
IS 200	Integrated Sciences 3	P/CP/F	8.5
LIC 210A	LIC: Family Medicine/Internal Medicine 2A	H/P/F	2.0
LIC 220A	LIC: Obstetrics/Gynecology 2A	H/P/F	2.5
LIC 230A	LIC: Pediatrics 2A	H/P/F	2.0
LIC 240A	LIC: Surgery 2A	H/P/F	2.5
LIC 250A	LIC: Psychiatry 2A	H/P/F	2.0
LIC 260A	LIC: Emergency Medicine 2A	H/P/F	1.0
REACH 201A	REACH 2A	P/CP/F	1.0
	Fall Semes	ster, Phase 2 Total:	22.0
Spring 2025 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 201B	Service-Learning 2B	P/CP/F	0.5
IS 250	Integrated Sciences 4	P/CP/F	7.5
LIC 210B	LIC: Family Medicine/Internal Medicine 2B	H/P/F	2.5
LIC 220B	LIC: Obstetrics/Gynecology 2B	H/P/F	2.5
LIC 230B	LIC: Pediatrics 2B	H/P/F	2.5
LIC 240B	LIC: Surgery 2B	H/P/F	2.5
LIC 250B	LIC: Psychiatry 2B	H/P/F	2.5
LIC 260B	LIC: Emergency Medicine 2B	H/P/F	1.0
REACH 201B	REACH 2B	P/CP/F	1.0
Spring Semester, Phase 2 Total:			
		Phase 2 Total:	44.5

Required Courses, Phase 3

Semester	Course Title/Category	Scale	Credits	Weeks
Fall	ACKT 300: Advanced Clinical Knowledge Training	P/F	0.5	4
Fall	IS 300A: Integrated Sciences 5A	P/F	1.0	2
Fall	REACH 300A: REACH 3A	P/F	1.0	1
Spring	IS 300B: Integrated Sciences 5B	P/F	0.5	1
Spring	REACH 300B: REACH 3B	P/F	1.0	2
Fall or Spring	CS 300.1 – 300.2: Advanced Clinical Selective (FM or IM)	H/P/F	5.0	4
Fall or Spring	CS 305.1 – 305.24: Advanced Clinical Selective (Student's Choice)	H/P/F	4.0 - 5.0	4
Fall or Spring	CS 310.1 – 310.5: Critical Care Selective	H/P/F	5.0	4
Fall or Spring	CS 315.1: Neurology Rotation (Two-Week Required)	P/F	2.0	2
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective	P/F	2.5	4
	Phase 3, Ye	ar 3 Total:	22.5 - 23.5	28
Years 3 or 4				
Semester	Course Title	Scale	Credits	Weeks
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives	P/F	16.0	16
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives or	P/F	5.0 - 8.0	8
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective			0
Eall an Onsin a	RS 400: Scholarly Project ⁹	P/F	0.0	4
Fall or Spring	The 400. Scholarly integect	F/F	6.0	
Fall or Spring	Phase 3, Years 3	1	27.0 - 30.0	
	1 1	1		
	Phase 3, Years 3	1		28
Year 4 (Fall 20	Phase 3, Years 3 (26, Spring 2027)	or 4 Total:	27.0 - 30.0	28
Year 4 (Fall 20 Semester	Phase 3, Years 3 (26, Spring 2027) Course Title	or 4 Total:	27.0 - 30.0 Credits	28 Weeks
Year 4 (Fall 20 Semester Fall	Phase 3, Years 3 26, Spring 2027) Course Title IS 400A: Integrated Sciences 6A	Scale P/F	27.0 - 30.0 Credits 0.5	28 Weeks 1
Year 4 (Fall 20 Semester Fall Fall	Phase 3, Years 3 26, Spring 2027) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A	Scale P/F P/F	27.0 - 30.0 Credits 0.5 1.5	28 Weeks 1 1 1 1
Year 4 (Fall 20 Semester Fall Fall Spring	Phase 3, Years 3 26, Spring 2027) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B	Scale P/F P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	28 Weeks 1 1 1 2
Year 4 (Fall 20 Semester Fall Fall Spring Spring	Phase 3, Years 3 26, Spring 2027) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B	Scale P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0	28 Weeks 1 1 1 2 4
Year 4 (Fall 20 Semester Fall Fall Spring Spring Spring	Phase 3, Years 3 26, Spring 2027) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B CS 499: Residency Immersive	Scale P/F P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	28 Weeks 1 1 1 2 4 4 14

⁹ Students enrolled in the MD/PhD program are not required to complete RS 400 – Scholarly Project since they will be completing a dissertation as part of their PhD degree requirements at Cal-Tech.

Required Credit Hours for the MD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.0
Phase 2 (Year 2)	44.5
Phase 3 (Years 3 and 4)	61.5 – 65.5
Total Required for Degree:	135.0 – 139.0

Required Credit Hours for the MD/PhD Degree

Curricular Phase	Total Credit Hours Required	
Phase 1 (Year 1)	29.0	
Phase 2 (Year 2)	44.5	
Clinical Continuation ¹⁰	4.0	
Phase 3 (Years 3 and 4)	55.5 - 59.5	
Total Required for Degree:	133.0 – 137.0	

¹⁰ MD/PhD students are required to complete LIC 270 – MD/PhD LIC Continuation during each year of their PhD program at Cal-Tech.

MD Curriculum, Students Entering in Fall 2022

Required Courses, Phase 1, Year 1

Fall 2022 Semester			
Subject/Course Number	Course Title	Scale	Credits
EIE 100	Early Immersive Experience	P/CP/F	2.0
HSS 101A	Service-Learning 1A	P/CP/F	0.5
IS 100	Integrated Sciences 1	P/CP/F	8.5
LIC 101A	Longitudinal Integrated Clerkship 1A	P/F	1.0
REACH 101A	REACH 1A	P/CP/F	1.0
	Fall Sen	nester, Phase 1 Total:	13.0
Spring 2023 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 101B	Service-Learning 1B	P/CP/F	0.5
IS 160	Integrated Sciences 2	P/CP/F	13.5
LIC 101B	Longitudinal Integrated Clerkship 1B	P/F	1.5
REACH 101B	REACH 1B	P/CP/F	1.0
	Spring Sen	nester, Phase 1 Total:	16.5
		Phase 1 Total:	29.5

Required Courses, Phase 2, Year 2

Fall 2023 Semester Subject/Course Number	Course Title	Scale	Credits
HSS 201A	Service-Learning 2A	P/CP/F	0.5
IS 200	Integrated Sciences 3	P/CP/F	8.5
LIC 210A	LIC: Family Medicine/Internal Medicine 2A	H/P/F	2.0
LIC 220A	LIC: Obstetrics/Gynecology 2A	H/P/F	2.5
LIC 230A	LIC: Pediatrics 2A	H/P/F	2.0
LIC 240A	LIC: Surgery 2A	H/P/F	2.5
LIC 250A	LIC: Psychiatry 2A	H/P/F	2.0
LIC 260A	LIC: Emergency Medicine 2A	H/P/F	1.0
REACH 201A	REACH 2A	P/CP/F	1.0
	Fall Semes	ter, Phase 2 Total:	22.0
Spring 2024 Semester			
Subject/Course Number	Course Title	Scale	Credits
<u> </u>	Course Title Service-Learning 2B	Scale P/CP/F	Credits 0.5
Subject/Course Number			
Subject/Course Number HSS 201B	Service-Learning 2B	P/CP/F	0.5
Subject/Course Number HSS 201B IS 250	Service-Learning 2B Integrated Sciences 4	P/CP/F P/CP/F	0.5 7.5
Subject/Course Number HSS 201B IS 250 LIC 210B	Service-Learning 2B Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B	P/CP/F P/CP/F H/P/F	0.5 7.5 2.5
Subject/Course Number HSS 201B IS 250 LIC 210B LIC 220B	Service-Learning 2B Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B	P/CP/F P/CP/F H/P/F H/P/F	0.5 7.5 2.5 2.5
Subject/Course Number HSS 201B IS 250 LIC 210B LIC 220B LIC 230B	Service-Learning 2B Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B	P/CP/F P/CP/F H/P/F H/P/F	0.5 7.5 2.5 2.5 2.5
Subject/Course Number HSS 201B IS 250 LIC 210B LIC 220B LIC 230B LIC 240B	Service-Learning 2B Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B	P/CP/F P/CP/F H/P/F H/P/F H/P/F	0.5 7.5 2.5 2.5 2.5 2.5
Subject/Course Number HSS 201B IS 250 LIC 210B LIC 220B LIC 230B LIC 240B LIC 250B	Service-Learning 2B Integrated Sciences 4 LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B LIC: Psychiatry 2B	P/CP/F P/CP/F H/P/F H/P/F H/P/F H/P/F	0.5 7.5 2.5 2.5 2.5 2.5 2.5

Required Courses, Phase 3

Semester	Course Title/Category	Scale	Credits	Weeks
Fall	ACKT 300: Advanced Clinical Knowledge Training	P/F	0.5	4
Fall	IS 300A: Integrated Sciences 5A	P/F	1.0	2
Fall	REACH 300A: REACH 3A	P/F	1.0	1
Spring	IS 300B: Integrated Sciences 5B	P/F	0.5	1
Spring	REACH 300B: REACH 3B	P/F	1.0	2
Fall or Spring	CS 300.1 – 300.2: Advanced Clinical Selective (FM or IM)	H/P/F	5.0	4
Fall or Spring	CS 305.1 – 305.24: Advanced Clinical Selective (Student's Choice)	H/P/F	4.0 - 5.0	4
Fall or Spring	CS 310.1 – 310.5: Critical Care Selective	H/P/F	5.0	4
Fall or Spring	CS 315.1: Neurology Rotation (Two-Week Required)	P/F	2.0	2
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective	P/F	2.5	4
· -	Phase 3, Ye	ar 3 Total:	22.5 - 23.5	28
Years 3 or 4				
Semester	Course Title	Scale	Credits	Weeks
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives	P/F	16.0	16
Fall or Caring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives or	D/E	F 0 9 0	0
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives or HSS 300.1 – 350.16: Health Systems Science Selective	P/F	5.0 - 8.0	8
Fall or Spring Fall or Spring		P/F	5.0 - 8.0	
	HSS 300.1 – 350.16: Health Systems Science Selective	P/F		8 4 28
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3	P/F	6.0	4
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹	P/F	6.0	4 28
Fall or Spring Year 4 (Fall 20	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 (25, Spring 2026)	P/F or 4 Total:	6.0 27.0 - 30.0	4 28
Fall or Spring Year 4 (Fall 20 Semester	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 25, Spring 2026) Course Title	P/F or 4 Total:	6.0 27.0 - 30.0 Credits	4 28 Weeks
Fall or Spring Year 4 (Fall 20 Semester Fall	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 25, Spring 2026) Course Title IS 400A: Integrated Sciences 6A	P/F or 4 Total: Scale P/F	6.0 27.0 - 30.0 Credits 0.5	4 28 Weeks
Fall or Spring Year 4 (Fall 20 Semester Fall Fall	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 25, Spring 2026) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A	P/F or 4 Total: Scale P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5	4 28 Weeks 1 1 1 1 1
Fall or Spring Year 4 (Fall 20 Semester Fall Fall Spring	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 25, Spring 2026) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B	P/F or 4 Total: Scale P/F P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	4 28 Weeks 1 1 1 1 2
Fall or Spring Year 4 (Fall 20 Semester Fall Fall Spring Spring	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 25, Spring 2026) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B	P/F or 4 Total: Scale P/F P/F P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5 0.5 1.0	4 28 Weeks 1 1 1 1 2
Fall or Spring Year 4 (Fall 20 Semester Fall Fall Spring Spring Spring Spring	HSS 300.1 – 350.16: Health Systems Science Selective RS 400: Scholarly Project ¹¹ Phase 3, Years 3 25, Spring 2026) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B CS 499: Residency Immersive	P/F or 4 Total: Scale P/F P/F P/F P/F P/F P/F	6.0 27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	4

¹¹ Students enrolled in the MD/PhD program are not required to complete RS 400 – Scholarly Project since they will be completing a dissertation as part of their PhD degree requirements at Cal-Tech.

Required Credit Hours for the MD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.5
Phase 2 (Year 2)	44.5
Phase 3 (Years 3 and 4)	61.5 - 65.5
Total Required for Degree:	135.5 - 139.5

Required Credit Hours for the MD/PhD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	29.5
Phase 2 (Year 2)	44.5
Clinical Continuation ¹²	4.0
Phase 3 (Years 3 and 4)	55.5 - 59.5
Total Required for Degree:	133.5 – 137.5

¹² MD/PhD students are required to complete LIC 270 – MD/PhD LIC Continuation during each year of their PhD program at Cal-Tech.

MD Curriculum, Students Entering in Fall 2021

Required Courses, Phase 1, Year 1

Fall 2021 Semester			
Subject/Course Number	Course Title	Scale	Credits
EIE 100	Early Immersive Experience	P/CP/F	3.0
HSS 101A	Service-Learning 1A	P/CP/F	0.5
IS 100	Integrated Sciences 1	P/CP/F	8.5
LIC 101A	Longitudinal Integrated Clerkship 1A	P/F	1.0
REACH 101A	REACH 1A	P/CP/F	1.0
	Fall Sem	nester, Phase 1 Total:	14.0
Spring 2022 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 101B	Service-Learning 1B	P/CP/F	0.5
IS 160	Integrated Sciences 2	P/CP/F	13.5
LIC 101B	Longitudinal Integrated Clerkship 1B	P/F	1.5
REACH 101B	REACH 1B	P/CP/F	1.0
	Spring Sem	nester, Phase 1 Total:	16.5
		Phase 1 Total:	30.5

Required Courses, Phase 2, Year 2

Fall 2022 Semester Subject/Course Number	Course Title	Scale	Credits
HSS 201A	Service-Learning 2A	P/CP/F	0.5
IS 200	Integrated Sciences 6	P/CP/F	7.5
LIC 210A	LIC: Family Medicine/Internal Medicine 2A	H/P/F	2.0
LIC 220A	LIC: Obstetrics/Gynecology 2A	H/P/F	2.0
LIC 230A	LIC: Pediatrics 2A	H/P/F	2.0
LIC 240A	LIC: Surgery 2A	H/P/F	2.5
LIC 250A	LIC: Psychiatry 2A	H/P/F	1.5
LIC 260A	LIC: Emergency Medicine 2A	H/P/F	1.5
REACH 201A	REACH 2A	P/CP/F	1.0
	Fall Semest	ter, Phase 2 Total:	20.5
Spring 2023 Semester			
Subject/Course Number	Course Title	Scale	Credits
HSS 201B	Service-Learning 2B	P/CP/F	1.0
IS 250	Integrated Sciences 7	P/CP/F	6.5
110 0100			
LIC 210B	LIC: Family Medicine/Internal Medicine 2B	H/P/F	2.0
LIC 210B LIC 220B	LIC: Family Medicine/Internal Medicine 2B LIC: Obstetrics/Gynecology 2B	H/P/F H/P/F	
			2.0
LIC 220B	LIC: Obstetrics/Gynecology 2B	H/P/F	2.0 2.0
LIC 220B LIC 230B	LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B	H/P/F H/P/F	2.0 2.0 2.5
LIC 220B LIC 230B LIC 240B	LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B	H/P/F H/P/F H/P/F	2.0 2.0 2.5 1.5
LIC 220B LIC 230B LIC 240B LIC 250B	LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B LIC: Psychiatry 2B	H/P/F H/P/F H/P/F H/P/F	2.0 2.0 2.5 1.5
LIC 220B LIC 230B LIC 240B LIC 250B LIC 260B	LIC: Obstetrics/Gynecology 2B LIC: Pediatrics 2B LIC: Surgery 2B LIC: Psychiatry 2B LIC: Emergency Medicine 2B REACH 2B	H/P/F H/P/F H/P/F H/P/F	2.0 2.0 2.5 1.5 1.5 20.5

Required Courses, Phase 3

Semester	Course Title/Category	Scale	Credits	Weeks
Fall	ACKT 300: Advanced Clinical Knowledge Training	P/F	0.5	4
Fall	IS 300A: Integrated Sciences 5A	P/F	1.0	2
Fall	REACH 300A: REACH 3A	P/F	1.0	1
Spring	IS 300B: Integrated Sciences 5B	P/F	0.5	1
Spring	REACH 300B: REACH 3B	P/F	1.0	2
Fall or Spring	CS 300.1 – 300.2: Advanced Clinical Selective (FM or IM)	H/P/F	5.0	4
Fall or Spring	CS 305.1 – 305.24: Advanced Clinical Selective (Student's Choice)	H/P/F	4.0 - 5.0	4
Fall or Spring	CS 310.1 – 310.5: Critical Care Selective	H/P/F	5.0	4
Fall or Spring	CS 315.1: Neurology Rotation (Two-Week Required)	P/F	2.0	2
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective	P/F	2.5	4
	Phase 3, Yea	ar 3 Total:	22.5 - 23.5	28
Years 3 or 4				
Semester	Course Title	Scale	Credits	Weeks
Fall or Spring	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives	P/F	16.0	16
Fall or Chrina	CS 305.1 – 305.24, 320.1 – 399.99: CS Selectives or Electives or	P/F	5.0 - 8.0	0
Fall or Spring	HSS 300.1 – 350.16: Health Systems Science Selective	P/F	5.0 - 6.0	8
_				
Fall or Spring	RS 400: Scholarly Project ¹³	P/F	6.0	4
Fall or Spring	RS 400: Scholarly Project ¹³ Phase 3, Years 3	<u> </u>	6.0 27.0 - 30.0	
		<u> </u>		
	Phase 3, Years 3	<u> </u>		28
Year 4 (Fall 20	Phase 3, Years 3 (24, Spring 2025)	or 4 Total:	27.0 - 30.0	28
Year 4 (Fall 20 Semester	Phase 3, Years 3 (24, Spring 2025) Course Title	or 4 Total:	27.0 - 30.0 Credits	Weeks
Year 4 (Fall 20 Semester Fall	Phase 3, Years 3 (24, Spring 2025) Course Title IS 400A: Integrated Sciences 6A	Scale P/F	27.0 - 30.0 Credits 0.5	Weeks 1
Year 4 (Fall 20 Semester Fall Fall	Phase 3, Years 3 (24, Spring 2025) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A	Scale P/F P/F	27.0 - 30.0 Credits 0.5 1.5	Weeks 1 1 1
Year 4 (Fall 20 Semester Fall Fall Spring	Phase 3, Years 3 (24, Spring 2025) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B	Scale P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5	Weeks 1 1 1 1 2
Year 4 (Fall 20 Semester Fall Fall Spring Spring	Phase 3, Years 3 (24, Spring 2025) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B	Scale P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0	Weeks 1 1 1 1 2
Year 4 (Fall 20 Semester Fall Fall Spring Spring Spring	Phase 3, Years 3 (24, Spring 2025) Course Title IS 400A: Integrated Sciences 6A REACH 400A: REACH 4A IS 400B: Integrated Sciences 6B REACH 400B: REACH 4B CS 499: Residency Immersive	Scale P/F P/F P/F P/F P/F	27.0 - 30.0 Credits 0.5 1.5 0.5 1.0 2.0	4 28 Weeks 1 1 1 1 2 4 4 4

¹³ Students enrolled in the MD/PhD program are not required to complete RS 400 – Scholarly Project since they will be completing a dissertation as part of their PhD degree requirements at Cal-Tech.

Required Credit Hours for the MD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	30.5
Phase 2 (Year 2)	41.0
Phase 3 (Years 3 and 4)	61.5 – 65.5
Total Required for Degree:	133.0 - 137.0

Required Credit Hours for the MD/PhD Degree

Curricular Phase	Total Credit Hours Required
Phase 1 (Year 1)	30.5
Phase 2 (Year 2)	41.0
Clinical Continuation ¹⁴	4.0
Phase 3 (Years 3 and 4)	55.5 - 59.5
Total Required for Degree:	131.0 - 135.0

¹⁴ MD/PhD students are required to complete LIC 270 – MD/PhD LIC Continuation during each year of their PhD program at Cal-Tech.

Course Descriptions

Phase 1, Year 1

EIE 100, Early Immersive Experience (2.0 credit hours)

Grading scale: P/CP/F, Location: KPSOM

Students are orientated to the school of medicine and introduced to the integrated sciences curriculum, including biomedical science, clinical science, and HSS. In addition, students begin to develop skills in meta-cognition and begin their professional identity formation, including acquiring early clinical skills. Students have their first LIC visit as well as their first Service-Learning visit.

HSS 101A, Service-Learning 1A (0.5 credit hours)

Grading Scale: P/CP/F, Location: KPSOM and Assigned Federally Qualified Health Center Based at a Federally Qualified Health Center in the same geographic region as students assigned Kaiser Permanente (KP) LIC clinical site, students learn about the social factors that influence health and how to collaborate with community partners to help address the needs of the clinic, its patient population, and the communities it serves.

HSS 101B, Service-Learning 1B (0.5 credit hours)

Grading Scale: P/CP/F, Location: KPSOM and Assigned Federally Qualified Health Care Center Continuation of HSS 101A.

IS 100, Integrated Sciences 1 (9.5 credit hours)

Grading scale: P/CP/F, Location: KPSOM

All Integrated Sciences (IS) courses consist of three components: Scientific Basis of Healthcare (SBH), Doctoring, and HSS. In IS1, students learn in the context of clinical presentations from the following units: 1) fundamentals; 2) gastrointestinal, endocrinologic, metabolic; and 3) genitourinary, reproduction. This course primarily employs facilitated small group discussions and simulation experiences to achieve these goals. Current course numbering applies to classes entering in the fall of 2021 and beyond.

IS 160, Integrated Sciences 2 (12.5 credit hours)

Grading scale: P/CP/F, Location: KPSOM

All IS courses consist of SBH, Doctoring, and HSS. Students learn in an integrated manner in the context of clinical presentations from the following units: 1) renal; 2) cardiovascular, pulmonary; 3) hematology, oncology, immunology; 4) infectious disease; 5) musculoskeletal, dermatologic; and 6) mind, nervous system. Current course numbering applies to classes entering in the summer of 2021 and beyond.

LIC 101A, Longitudinal Integrated Clerkship 1A: Family Medicine/Internal Medicine (1.0 credit hour)

Grading scale: P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center).

The LIC serves as the first component of a two-year clerkship experience at one of seven KP Medical Centers (Downey, Los Angeles, Panorama City, San Bernardino, South Bay, and West Los Angeles). Each student spends one half-day per week in a clinic with a Family Medicine or Internal Medicine preceptor during the first year.

LIC 101B, Longitudinal Integrated Clerkship 1B: Family Medicine/Internal Medicine (1.0 credit hour)

Grading scale: P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center) Continuation of LIC 101A.

REACH 101A, Reflection, Education, Assessment, Coaching, Health, and Well-Being 1A (1.0 credit hour)

Grading scale: P/CP/F, Location: KPSOM

Reflection, Education, Assessment, Coaching, and Health and well-being (REACH) courses constitute a four-year longitudinal curriculum led primarily by physician coaches, designed to foster the skills of informed self-assessment, professional identity formation, self-directed learning, and personal and professional goal setting. The course is uniquely designed to further learning frameworks and practices for student and physician health and well-being.

REACH 101B, Reflection, Education, Assessment, Coaching, Health, and Well-Being 1B (1.0 credit hour)

Grading scale: P/CP/F, Location: KPSOM

Continuation of REACH 101A.

Phase 2, Year 2

HSS 201A, Service-Learning 2A (0.5 credit hours)

Grading Scale: P/CP/F, Location: KPSOM, Assigned Federally Qualified Health Center Based at a federally qualified health center in the same geographic region as the Longitudinal Integrated Curriculum Kaiser Permanente site, students will learn about the social factors that influence health and collaborate with community partners to help address the clinic's needs, its patient population, and the communities it serves.

HSS 201B, Service-Learning 2B (0.5 credit hours)

Grading Scale: P/CP/F, Location: KPSOM, Assigned Federally Qualified Health Center. Continuation of HSS 201A.

IS 200.01, Integrated Sciences 3 (8.5 credit hours)

Grading scale: P/CP/F, Location: KPSOM

Continuing from the IS courses of Phase 1, the three components of SBH, Doctoring, and HSS are learned at a higher level of integration, primarily using facilitated small-group case discussions and simulation. Rather than a unit structure defined by cases of the same organ system, cases rotate organ systems from week to week.

IS 250.01, Integrated Sciences 4 (7.5 credit hours)

Grading scale: P/CP/F, Location: KPSOM

Continuation of IS 200. (Previously Integrated Sciences 7)

LIC 210A, Longitudinal Integrated Core Clerkship: Family Medicine/Internal Medicine (2.0 credit hours)

Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)

This course provides supervised clinical education in Family Medicine/Internal Medicine, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional collaboration.

LIC 210B, Longitudinal Integrated Clerkship: Family Medicine/Internal Medicine (2.5 credit hours)

Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)

Continuation of LIC210A.

LIC 220A, Longitudinal Integrated Clerkship: Obstetrics/Gynecology (2.5 credit hours)

Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)

This course provides supervised clinical education in obstetrics/gynecology, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional collaboration.

LIC 220B, Longitudinal Integrated Clerkship: Obstetrics/Gynecology (2.5 credit hours)

Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center) Continuation of LIC 220A.

LIC 230A, Longitudinal Integrated Clerkship: Pediatrics (2.0 credit hours)

Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)

This course provides supervised clinical education in pediatrics, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional collaboration.

LIC 230B, Longitudinal Integrated Clerkship: Pediatrics (2.5 credit hours)
Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)
Continuation of LIC230A.

LIC 240A, Longitudinal Integrated Clerkship: Surgery (2.5 credit hours)
Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated
Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange
County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County
Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)
This course provides supervised clinical education in general surgery, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional collaboration.

LIC 240B, Longitudinal Integrated Clerkship: Surgery (2.5 credit hours)
Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)
Continuation of LIC 240A.

LIC 250A, Longitudinal Integrated Clerkship: Psychiatry (2.0 credit hours)
Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)
This course provides supervised clinical education in psychiatry, including clinical management, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional collaboration.

LIC 250B, Longitudinal Integrated Clerkship: Psychiatry (2.5 credit hours)
Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)
Continuation of LIC 250A.

LIC 260A, Longitudinal Integrated Clerkship: Emergency Medicine (1.0 credit hours)
Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated
Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange
County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County
Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)
This course provides supervised clinical education in emergency medicine, including clinical
management, technical and procedural skills, interpretation of diagnostic data, patient education,
development of diagnostic and management plans, and interprofessional collaboration.

LIC 260B, Longitudinal Integrated Clerkship: Emergency Medicine (1.0 credit hours) Grading scale: H/P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center) Continuation of LIC 260A.

LIC 270, MD/Ph.D. LIC Continuation (1.0 credit hours)

Grading scale: P/F, Location: Assigned Kaiser Permanente Medical Center and affiliated Medical Office Buildings (Downey Medical Center, Los Angeles Medical Center, Orange County Anaheim Medical Center, Panorama City Medical Center, San Bernadino County Medical Center, South Bay Medical Center, or West Los Angeles Medical Center)

This source provides supervised clinical education in family medicine (internal medicine including)

This course provides supervised clinical education in family medicine/internal medicine, including clinical management, technical and procedural skills, interpretation of diagnostic data, patient education, development of diagnostic and management plans, and interprofessional communication for MD/PhD students.

REACH 201A, Reflection, Education, Assessment, Coaching, Health, and Well-Being 2A (1.0 credit hour)

Grading scale: P/CP/F, Location: KPSOM

REACH courses constitute a four-year longitudinal curriculum led primarily by physician coaches. The continuation of REACH in Phase 2 adds the Healer's Art Course session as an expansion of the well-being curriculum.

REACH 201B, Reflection, Education, Assessment, Coaching, Health, and Well-Being 2B (1.0 credit hours)

Grading scale: P/CP/F, Location: KPSOM

Continuation of REACH 201A.

Phase 3, Years 3 and 4

ACKT 300, Advanced Clinical Knowledge Training (0.5 credit hours)

Grading scale: P/F, Location: KPSOM

The Advanced Clinical Knowledge Training Course (ACKT) provides four weeks of structured and independent learning opportunities to allow students to consolidate their clinical knowledge and skills in preparation for advanced clinical rotations and the USMLE Step 2.

Integrated Sciences

IS 300A, Integrated Sciences 5A (1.0 credit hour)

Grading scale: P/F, Location: KPSOM

Students analyze cases, hone clinical skills, and learn advanced biomedical, clinical, and health systems science content relevant to the USMLE Step 2 Clinical Knowledge (CK) exam and becoming excellent physicians. Previously Integrated Sciences 8A.

IS 300B, Integrated Sciences 5B (0.5 credit hour)

Grading scale: P/F, Location: KPSOM

Continuation of IS 300A. Previously Integrated Sciences 8B.

IS 400A, Integrated Sciences 6A (0.5 credit hour)

Grading scale: P/F, Location: KPSOM

Students will analyze cases, hone clinical skills, and learn advanced biomedical, clinical, and health systems science content relevant to becoming an excellent physician.

IS 400B, Integrated Sciences 6B (0.5 credit hour)

Grading scale: P/F, Location: KPSOM

Continuation of IS 400B.

REACH

REACH 301A, Reflection, Education, Assessment, Coaching, Health, and Well-Being 3A (1.0 credit hours)

Grading scale: P/F, Location: KPSOM

REACH courses constitute a four-year longitudinal curriculum led primarily by physician coaches. The continuation of REACH in Phase 3 focuses on 1) cross-cultural health and well-being practices, 2) the hidden curriculum and creating organizational cultures that foster professionalism and well-being, and 3) compassion and forgiveness for self and others.

REACH 301B, Reflection, Education, Assessment, Coaching, Health, and Well-Being 3B (1.0 credit hours)

Grading scale: P/F, Location: KPSOM

Continuation of REACH 301A.

REACH 401A, Reflection, Education, Assessment, Coaching, Health, and Well-Being 4A (1.5 credit hours)

Grading scale: P/F, Location: KPSOM

REACH courses constitute a four-year longitudinal curriculum led primarily by physician coaches. The continuation of REACH in the second half of Phase 3 focuses on the themes of 1) immunity to change and regulating peers and profession, 2) boundary issues and confidentiality, and 3) transitioning to residency and maintaining well-being practices.

REACH 401B, Reflection, Education, Assessment, Coaching, Health, and Well-Being 4B (1.0 credit hours)

Grading scale: P/F, Location: KPSOM

Continuation of REACH 401A.

Advanced Clinical Selectives (FM/IM)

CS 300.01 Advanced Clinical Selective (Family Medicine) (5.0 credit hours)
Grading scale: H/P/F, Location: Los Angeles Medical Center, Orange County – Anaheim
Medical Center, San Bernardino County Medical Center, or Woodland Hills Medical Center
This selective is a four-week clerkship where medical students are assigned to the inpatient family
medicine service at one of three different Kaiser Permanente Family Medicine Residency programs.
Medical students will be expected to actively participate in caring for hospitalized adult medicine
patients and provide patient-centered, team-based, evidence-informed care for a broad range of
conditions. Medical students will perform initial evaluations for patients being considered for
admission to the family medicine inpatient service and round with residents and hospital teaching
faculty. There is no overnight call. Medical students will be expected to spend 1-2 evenings per week
doing admissions and finish no later than 9 pm. Medical students will be expected to participate in
morning reports, lunch conferences, and other educational offerings.

CS 300.02 Advanced Clinical Selective (Internal Medicine) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center, Riverside Medical Center, or San Bernardino County Medical Center

This selective will allow medical students to learn about and manage adults admitted to the general medicine wards. Medical students will function as one of the primary caregivers for their patients. Medical students will participate in admission evaluations, diagnostic and therapeutic orders, and daily progress notes for the patients under their care. The student will be part of the medicine ward team consisting of an attending physician, senior resident, and interns. Medical students will be expected to take on increased responsibility in patient care, increase their experience in independently developing a care plan for their patients, and serve as the primary communicator with patients, families, and other members of the care teams. They will also attend lectures such as Morning Report and Noon Conferences.

Advanced Clinical Selectives (Student's Choice)

CS 305.01 Advanced Clinical Selective (Anesthesiology) (4.0 credit hours) Grading scale: H/P/F, Location: Baldwin Park Medical Center or West Lost Angeles Medical Center

This selective will help Phase 3 medical students to become well-prepared Anesthesiology residents. Medical students will develop and enhance their skills and knowledge of perioperative medicine, including the preoperative, intraoperative, and postoperative evaluation and anesthetic management of a full range of patients in various specialties.

CS 305.02 Advanced Clinical Selective (Dermatology) (4.0 credit hours)

Grading scale: H/P/F, Location: Los Angeles Medical Center and South Bay Medical Center This selective is for medical students strongly interested in pursuing a dermatology residency. Medical students will participate in ambulatory dermatology clinics, either with residents or one-on-one with faculty. They will be exposed to 1) a wide range of common skin conditions, 2) skin disorders associated with multisystem disease, and 3) the breadth of skin presentations that may be observed in different ethnic populations. Medical students will be expected to recognize and describe skin morphologies, perform a thorough skin examination, and participate in basic skin procedures.

They may also have the opportunity to participate in in-hospital consultations. At the end of the rotation, medical students will give a case-based presentation.

CS 305.03 Advanced Clinical Selective (Diagnostic Radiology/Nuclear Medicine) (4.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective has considerable breadth and depth; medical students will see much of medicine reflected in all types of radiology studies. Medical students will work with a resident and an attending daily and will never be alone on the rotation. Medical students will work with many different attendings and residents throughout the month and see inpatients, STAT/ER patients, and outpatients. Medical students will sit with the resident while they prelim cases and then sit with the resident and attending for the readouts that occur in the am and once in the pm. The one-month rotation will consist of four separate one-week "blocks." The four one-week blocks are divided into Inpatient/ER body, neuro, plain films, fluoroscopy, and ultrasound; outpatient body, neuro, plain films, fluoroscopy, ultrasound, nuclear medicine; mammography; and flexible/ mixed schedule.

CS 305.04 Advanced Clinical Selective (Emergency Medicine) (5.0 credit hours) Grading scale: H/P/F, Location: San Diego Medical Center

Under the direct supervision of Board-Certified Emergency Medicine faculty and residents, medical students will rotate in the largest and busiest Emergency Department in San Diego County for four weeks. The student will function as an integral member of the treatment team. Medical students will have the opportunity to rotate through our state-of-the-art simulation center. Medical students will practice ACLS) and PALS) protocols at the San Diego Simulation Center of Excellence and fine-tune their airway, ultrasound, and vascular management skills. Medical students will also participate in the weekly didactics and conferences run by faculty and residents.

CS 305.05 Advanced Clinical Selective (Genetics) (4.0 credit hours) Grading scale: H/P/F, Location: Glendale Medical Office Building, Los Angeles Medical Center, and Panorama City Medical Center

Third or fourth-year medical students will assess, plan diagnostic workups, and return results for patients referred to the medical genetics clinic. This will include the patients referred for many aspects of medical genetics, including prenatal, cancer, neurogenetics, dysmorphology, and metabolic genetics. This selective will reinforce the dysmorphology exam, documenting a thorough yet focused family history and disclosing difficult results necessary for medical genetics patient care competency. Additionally, medical students will learn variant interpretation, which is important for implementing precision medicine in many other medical specialties that use genetic testing extensively. Medical students will also spend time learning about several different methodologies in the molecular genetics laboratory. Medical students will spend three days per week with a single faculty member in a general genetics clinic and two days per week with other faculty members in subspecialty clinics and the genetics laboratory. There is no call during this selective, but occasional consults in the NICU are typically done during the clinic day. There will also be case conferences and some self-directed learning modules. This rotation would be ideal for medical students interested in many specialties, including pediatrics, OB/GYN, internal medicine (especially cardiology, GI, and Hematology/Oncology), and family medicine.

CS 305.06 Advanced Clinical Selective (Lab Medicine/Pathology) (4.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center and Regional Reference Laboratories

This selective exposes medical students to essential aspects of pathology and laboratory medicine. Medical students will participate in gross prosections, frozen section interpretation, and microscopic evaluation of surgical pathology specimens with histologic diagnosis, correlating with the patient's history and physical and laboratory findings. Medical students will also rotate in significant areas of the clinical laboratory, including chemistry, hematology, flow cytometry, blood bank, immunology, and microbiology. There will be opportunities to participate in multi-disciplinary conferences and learn about emerging technologies, clinical test performance, quality assurance, and laboratory stewardship. The faculty will vary from day to day. There will be no call or weekends. Medical students will be responsible for presenting a topic of choice at a department meeting at the end of their rotation.

CS 305.07 Advanced Clinical Selective (Neurological Surgery) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

The neurosurgery selective in Phase 3 is designed to give medical students an overview of neurosurgery regardless of their future specialty. Medical students become an integral part of the neurosurgery service, assisting neurosurgery staff, mid-level providers, and residents in multiple subspecialty fields within neurosurgery. Activities include ward and ICU rounds, observing and assisting in the OR, taking call, and attending teaching conferences. This rotation exposes medical students to sub-specialty areas within neurosurgery, including week-long rotations within general, pediatric, spine, functional, and vascular neurosurgery. If requested beforehand, the rotation can be further tailored to the student's interests.

CS 305.08 Advanced Clinical Selective (Neurology) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

The neurology selective will serve as a sub-internship for medical students considering pursuing a career in neurology. It may also interest medical students considering neurosurgery, psychiatry, internal medicine, or family medicine who seek more significant exposure to diagnosing and treating patients with neurologic conditions. Medical students will spend four weeks participating in a combination of inpatient and outpatient neurology experiences. They will be expected to demonstrate emerging independence in developing an assessment and plan for patients presenting with neurologic symptoms. Overnight call may be taken 1-2 times per week.

CS 305.09 Advanced Clinical Selective (Obstetrics and Gynecology) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective will be a four-week immersive experience on Labor and Delivery at LAMC. During this rotation, medical students will be an integral part of the Obstetrics and Gynecology Team. Medical students will work with OBGYN residents as sub-interns and participate in all aspects of the inpatient OB service. Medical students will assess and admit patients in triage, follow patients during their labor course, participate in vaginal deliveries and cesarean sections, care for high-risk antepartum patients, and follow patients throughout their postpartum course until discharge. Medical students will be expected to take overnight call and/or be assigned to the night float service. Additionally, medical students will be expected to participate in resident educational activities and present a case at the conclusion of the selective.

CS 305.10 Advanced Clinical Selective (Occupational Medicine) (4.0 credit hours) Grading scale: H/P/F, Location: South Bay Medical Center

Third or fourth-year medical students will assess, diagnose, and plan for restoring health in injured workers through the application of systems-based practice. This will include the principles of preventive medicine, medical care, rehabilitation, and environmental health as part of a team in the clinical care setting. This selective will reinforce musculoskeletal physical exam skills necessary for occupational medicine patient care competency. Additionally, medical students will learn how to perform and build confidence in administering therapeutic injections for patient care. Practice-based learning and improvement are always supported, emphasizing time management skills within a busy clinical practice. The faculty will vary from day to day. During this selective, there is no call as it is 100% outpatient, Monday through Friday.

CS 305.11 Advanced Clinical Selective (Ophthalmology) (5.0 credit hours) Grading scale: H/P/F, Location: Baldwin Park Medical Center and West Los Angeles Medical Center

The ophthalmology selective will be an in-depth four-week rotation in clinical ophthalmology that includes general ophthalmology and the principal/core sub-specialties, including cornea/refractive, glaucoma, retina, and pediatric ophthalmology. Medical students will rotate through each subspecialty and work with attending physicians in the clinic and operating room to learn about managing and treating various ophthalmology conditions. Medical students will learn core ophthalmology examination techniques and how to interpret ophthalmology images such as retinal photographs and optical coherence tomography. Additional emphasis will be placed on learning about new care delivery models, such as teleophthalmology programs, and integrating up-to-date, evidence-based medicine into practice and ophthalmology public health initiatives. Limited home call may be taken on Saturdays.

CS 305.12 Advanced Clinical Selective (Orthopedic Surgery) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective is a four-week hands-on rotation to understand orthopedic surgery better. During this rotation, the student will work one-on-one with different attendings doing orthopedic trauma, joint replacement surgery, and sports medicine. During the rotation, the goal is to learn how to manage basic fractures, arthritis of the knee and shoulder, and sports injuries such as anterior cruciate ligament tears, meniscus tears, and labrum tears. We aim for the student to be directly involved in inpatient care and learn splinting techniques, basic suturing, and closed reductions. The rotation is Monday through Friday and has two weekend call days per month.

CS 305.13 Advanced Clinical Selective (Otolaryngology) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective is a four-week course providing an overview of disorders of the otolaryngology specialty. This course will include inpatient and outpatient components. In the outpatient setting, medical students will evaluate patients in the clinic and learn a comprehensive head and neck physical exam. The goal is for medical students to learn to diagnose disorders of the ear, nose, throat, and other related structures. Skills acquired include otoscopic exam, laryngoscopic exam, nasal endoscopy, cranial nerve exam, comprehensive oral exam, and examination of the head and neck lymph nodes. Time will be spent with different faculty in each subspecialty of otolaryngology, including otology, laryngology, rhinology, head and neck oncology, facial plastics, pediatrics, and maxillofacial surgery. Clinical knowledge will then be transferred to the operating room, where medical students will learn and participate in the surgical correction of clinical disorders. Medical students will be intimately engaged in the operative field in the operating room, learn operative techniques, and participate by assisting in surgery. Skills learned will include making incisions, tying

knots, and suture techniques. Complete immersion in the otolaryngology experience will consist of overnight home call where medical students will learn about ENT emergencies and how to evaluate patients in the emergency room. Medical students will learn how to assess and treat basic ENT disorders. Participation in daily inpatient rounds will provide medical students with experience in continuity of care and inpatient post-surgical care of patients.

CS 305.14 Advanced Clinical Selective (Pediatrics) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective will be a four-week rotation that will approximate an intern's experience in the pediatric ward. Medical students will see a combination of general pediatrics and more complex patients that one would expect at a tertiary referral center and take on primary responsibility for their patients. Two weeks of the rotation will be on the "acute" service taking care of children with more short-term hospital needs; one week will be on the "chronic" service taking care of the more complicated children with longer-term hospital needs. One week will be spent as the "swing" intern, where students will primarily admit and initiate workups on new patients. No call will be taken, although the swing shift will extend into the evening hours to expose medical students to the differences between "day medicine" and "night medicine." Medical students can attend and partake in morning and evening sign-outs, participate in daily family-centered rounds, attend morning and afternoon didactics, provide education to families, coordinate care in the inpatient and outpatient spaces, and place consults with subspecialists. Medical students will work with our attendings regularly and spend considerable time with our pediatrics house staff. By the end of the rotation, medical students should be able to perform a history and physical on a patient admitted to the pediatric ward, be able to recognize indications of admission, formulate differential diagnoses for common pediatric concerns, effectively communicate pertinent patient information and plans during sign-outs, identify the impacts of social determinants of health on pediatric populations, and perform developmentally appropriate physical exams.

CS 305.15 Advanced Clinical Selective (Physical Medicine and Rehabilitation) (4.0 credit hours)

Grading scale: H/P/F, Location: Los Angeles Medical Center and Keck Medicine of USC This selective will offer broad exposure to Physical Medicine and Rehabilitation (PM&R) through various inpatient and outpatient experiences with multiple faculty members. Medical students will refine their neurological and musculoskeletal physical exam skills and learn to perform musculoskeletal ultrasound (both for diagnosis and ultrasound-guided treatments), electrodiagnostic testing, and interventional procedures. Medical students will learn the roles of a PM&R specialist and those of physical therapy, occupational therapy, speech therapy, and other clinicians in the multi-disciplinary approach to managing patients with disabling diseases and injuries. During this four-week selective, students will spend two weeks in the inpatient Acute Rehabilitation Unit (ARU) at Keck Medicine of USC and two weeks in the ambulatory clinic at Kaiser Permanente Medical Centers: LAMC. No call will be taken.

CS 305.16 Advanced Clinical Selective (Plastic Surgery) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center and West Los Angeles Medical Center

This selective is a four-week clinical experience encompassing all aspects of plastic & reconstructive surgery, including general plastic surgery, reconstructive microsurgery, hand surgery, craniofacial surgery, gender affirmation surgery, and aesthetic surgery. Medical students will learn the fundamental principles of surgical reconstruction through didactic education, outpatient clinical experiences, and hands-on intraoperative participation. There will also be opportunities to learn and

practice surgical skills such as suturing and knot tying. The course will be taught by expert faculty from all plastic surgery subspecialties. Medical students will also work alongside and learn from plastic surgery and general surgery resident physicians. At-home night or weekend call may be taken with the resident and attending supervision. The selective is designed for all medical students interested in learning more about the fundamentals of surgery, developing basic surgical skills, exploring the field of plastic surgery, or applying to a surgical residency program.

CS 305.17 Advanced Clinical Selective (Psychiatry) (5.0 credit hours) Grading scale: H/P/F, Location: San Bernardino County Medical Center and Canyon Ridge Hospital

Medical students can work in a multi-disciplinary team of social workers, nurses, and physicians. They will focus on learning culturally competent interviewing, formulation, differential diagnosis, and psychopharmacology in a fast-paced environment where most patients stay for 3-5 days. The selective provides intensive exposure to a broad spectrum of conditions encountered in inpatient public psychiatry. The most prevalent disorders include schizophrenia, substance dependence, PTSD, and mood, panic, and personality disorders. Medical illnesses often complicate psychiatric disorders. Treatments include psychopharmacology, supportive therapy, milieu therapy, group therapy, and occupational therapy.

CS 305.18 Advanced Clinical Selective (Radiation Oncology) (4.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

Medical students will participate in a four-week outpatient rotation in the Radiation Oncology Department, where they will develop an understanding of the role of radiation therapy in multi-disciplinary oncologic care. Medical students will be directly involved in patient care under the supervision of an attending physician and/or resident and learn how to obtain an oncologic history and physical and use relevant literature to make evidence-based treatment recommendations. Medical students will participate in multi-disciplinary clinics, biweekly case conferences, and didactic conferences. Medical students will be exposed to the various modalities of radiation delivery, including external beam radiotherapy, stereotactic body radiotherapy, LINAC-based stereotactic radiosurgery, and interstitial and intracavitary brachytherapy. Medical students will participate in radiation planning and learn how to delineate target volumes and determine plan-specific normal tissue constraints. Finally, medical students will present a relevant radiation oncology topic to the department at the conclusion of their rotation. Interested medical students may also inquire about clinical investigation opportunities within the department.

CS 305.19 Advanced Clinical Selective (Surgery) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective is designed for medical students who wish to achieve an in-depth understanding and practical application of the principles of general surgery and its components. Medical students are integrated into a high-volume surgical residency program. Each team comprises faculty members, residents (or fellows), and medical students. This small team approach promotes efficient learning, shared responsibility, and interaction with attending surgeons. Patients present with both common problems and tertiary referrals. Medical students participate in operating room cases, inpatient rounds, outpatient clinics, and didactic conferences. Medical students will take an in-house overnight call on the weekend. Continuity of care is emphasized; medical students participate in pre/postoperative care. This selective is designed for medical students considering a career in surgery. The selective will last for four weeks; the student will rotate in two different services for two weeks each. Rotations are in general surgery/minimally invasive surgery; breast, colon, and rectal surgery; pediatric surgery; surgical oncology; thoracic surgery; and vascular surgery. An interested student may rotate in specific services or one service alone for four weeks when schedules allow.

CS 305.20 Advanced Clinical Selective (Urology) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

Medical students rotating with the Department of Urology will have an immersive experience encompassing all aspects of urology, including urologic oncology and robotics, endourology, pediatric urology, female pelvic and reconstructive urology, neuro-urology, men's health & infertility, and interventional radiology. Medical students will rotate in the clinic and operating room with eight fellowship-trained attendings and a stellar cadre of resident physicians. A wide array of urologic pathology is encountered. Medical students will spend three-fourths of their time in the OR and one-fourth in the clinic.

The mission of the KP urology program is to provide the best urological exposure to guide and inform a career in urology. Our program offers a maximal educational experience in operative, procedural, and office urology. In addition, medical students will have opportunities to perform clinical and epidemiological research. Medical students are expected to take call for at least one week during rotation.

Medical students will participate in educational conferences through clinical presentations, lectures, reviews of recent literature, discussions of research projects, and imaging and pathology review. Patient rounds are made daily, and grand rounds are held weekly, during which medical students, residents, and attending physicians are free from all clinical duties. Medical students will craft a presentation on a topic of their choice and present it at an educational conference during the last week of their rotation.

CS 305.21 Advanced Clinical Selective (Vascular and Interventional Radiology) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

This selective will provide a robust, hands-on, four-week experience in a busy Interventional Radiology (IR) practice. The VIR section at LAMC consists of nine peripheral vascular interventional radiologists and three neuro-interventional radiologists. The primary experience will be on the peripheral side, with an option to spend time with neuro-IR colleagues.

During the rotation, most of the time will be spent performing a variety of image-guided interventions. Medical students will serve as the primary operator on several "minor" image-guided interventions such as paracenteses, thoracenteses, ultrasound-guided vascular access, superficial biopsies, etc. Medical students will be first assist on complex vascular (peripheral arterial and venous interventions, embolizations, TIPS, BRTO, radioembolizations, etc.) and non-vascular interventions (tumor ablations, solid organ interventions including percutaneous biliary and renal interventions, spine interventions, etc.). Graduated autonomy will be provided at the discretion of the VIR attending based on medical students' clinical and technical development. Motivated medical students have served as primary operators in complex interventions under the direct supervision of a VIR attending.

In addition to performing procedures, medical students will spend time in a busy outpatient VIR clinic where they will encounter patients with head-to-toe pathology, including patients with chronic liver disease, a multitude of malignancies including hepatocellular carcinoma, renal cell carcinoma, cholangiocarcinoma, primary lung cancer, peripheral arterial disease, deep venous thrombosis, inferior vena cava filter-associated complications, gynecologic disease, congenital vascular diseases, chronic pain, osteoporotic compression fractures, and a host of other clinical issues. Additional time will be spent in the Vascular Birthmark Clinic, liver tumor board, and multi-disciplinary vascular conference.

Medical students will also perform inpatient interventional radiology consultations and staff these consultations each day with an IR attending. This will facilitate understanding of the hospitalized interventional radiology patient's workup, evaluation, and management.

Medical students will be expected to take a one-weekend call during their four-week rotation. Medical students will be off for the remaining three weekends.

During the rotation, medical students will also be expected to summarize and present a pivotal trial pertinent to VIR in a journal club setting. At the end of the rotation, medical students will create a PowerPoint presentation that discusses a complex case encountered and treated during the rotation.

CS 305.22 Advanced Clinical Selective (Cardiothoracic Surgery) (5.0 credit hours) Grading scale: H/P/F, Location: Los Angeles Medical Center

Medical students in this selective will be part of a busy cardiac surgery service, the largest one on the West Coast. The purpose of this elective is to provide medical students with an overview of cardiac surgical care and to dispel some of the myths associated with heart surgery. The medical students will participate in the operating room, clinic, inpatient rounds and potentially take call. Medical students will work as part of a team consisting of attending surgeons and support staff. Since there are no residents on the service, medical students will have the opportunity to work with attendings one-on-one. This rotation is designed for medical students who are interested in Cardiothoracic Surgery and would like more exposure to the surgical subspecialty.

Community Medicine Rotations

CS 400.01 Free Clinic of Simi Valley (4.0 credit hours) Grading Scale: P/F, Location: Simi Valley, CA

The Free Clinic of Simi Valley opened its doors in 1971. The Clinic has been an asset in the community, providing medical care, sometimes lifesaving care, for those in need. Thanks to the commitment and help of hundreds of volunteer professionals, the Clinic has administered care for more than 400,000 patients over the last fifty years. The medical services offered at the Free Clinic include – family medicine, dental, family counseling, legal aid, and ophthalmology examinations.

With its recent move into a new state-of-the-art 7,500 square feet OSHPD3 facility, the Clinic can care for even more patients weekly. The medical section of the facility houses one nurse's station, pharmacy, laboratory, four exam rooms, five dental stations, seven family counseling rooms – including two play therapy rooms for children, and an ophthalmology exam room. In 2020, the Free Clinic was named California Nonprofit of the Year and received the GuideStar Gold Seal of Transparency and the National Association of Free and Charitable Clinics Standards Gold status.

The Free Clinic is especially proud of its partnership with Kaiser Permanente Woodland Hills Medical Center—Family Medicine Residency Program. Since 2007, the Clinic has served as a training facility for resident physicians in the program. The training involves practical hands-on experience in an actual setting, with Kaiser Fellows supervising third-year family practice resident physicians. Sixty-nine resident physicians have participated in this training: transitioning to successful medical careers. The Clinic's training program has become one of the most popular training sites in the Community Medicine Program.

Coming full circle, Dr. Tracey Young, the medical director for the Free Clinic of Simi Valley, was a former Kaiser Fellow in Kaiser's Residency Program and participated in training at the Free Clinic.

CS 400.02 Healthcare in Action (Mobile Clinic – Street Medicine) (4.0 credit hours) Grading Scale: P/F, Location: Long Beach or West Hollywood, CA

Healthcare in Action is a medical group that provides care for patients experiencing homelessness. Often called "Street Medicine," we see patients where they reside, sometimes in tents, shelters, or the streets. Medical students will be able to work alongside one of two teams for the month, seeing patients under the supervision of one of the providers in one of Healthcare in Action's medical mobile vans.

Healthcare in Action occasionally partners with hospitals to care for patients upon discharge; however, most of the care we provide is on an outpatient basis. We function as a patient's primary care provider but focus on urgent and higher acuity chronic conditions that might destabilize a patient or cause acute harm. A substantial portion of our team's work focuses on providing social services with the ultimate aim of helping patients find stable housing.

CS 400.03 JWCH Institute (4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles, CA

The CCH Community Medicine rotation will expose students to underserved/homeless health care in a multidisciplinary setting. Through the rotation, students will interface with patients living with chronic co-morbid conditions who have experienced or are currently experiencing homelessness and will better understand the intersection of the Social Determinants of Health and patient outcomes.

CS 400.04 Lestonnac Free Clinic (4.0 credit hours)

Grading Scale: P/F, Location: Orange, CA

Lestonnac Free Clinic's mission is to provide free healthcare services to low-income and uninsured residents in Southern California through the support of generous volunteers and donors. They aim to expand the healthcare safety net to marginalized communities through collaboration and partnerships. This rotation will additionally serve as a unique opportunity to understand specialty care in a Free Clinic Model.

CS 400.05 Northeastern Valley Health Corporation (4.0 credit hours) Grading Scale: P/F, Location: Sun Valley, CA

The Mission of Northeast Valley Health Corporation is to provide quality, safe, and comprehensive primary healthcare to medically underserved residents of Los Angeles County, particularly in the San Fernando and Santa Clarita Valleys, in a manner that is sensitive to the economic, social, cultural, and linguistic needs of the community.

CS 400.06 ParkTree Community Health Center (4.0 credit hours) Grading Scale: P/F, Location: Ontario or Pomona, CA

ParkTree Community Health Center is a Federally Qualified Health Center providing comprehensive primary healthcare to adults and children living in the communities surrounding Pomona and Ontario, California.

ParkTree was founded in 1995 as the "Pomona Clinic Coalition" by Pomona Valley Hospital Medical Center and other local healthcare providers in response to the burgeoning indigent and working poor population in the eastern end of Los Angeles County and to address the region's lack of adequate public health infrastructure.

The range of services at ParkTree includes Primary Medical Care (Adults and Pediatrics), Women's Health, Behavioral Health, Dental Care, Behavioral Health, Diabetes Care, Podiatry, Optometry, and Telehealth.

CS 400.07 Venice Family Clinic (4.0 credit hours)

Grading Scale: P/F, Location: Redondo Beach/Torrance/Gardena/Inglewood/Carson, CA Since 1969, Venice Family Clinic has provided much-needed, evidence-based, outcome-driven, and culturally competent health services to more than 20,000 residents within the Greater South Bay community of Los Angeles County via the provision of more than 67,000 medical, dental, and behavioral health visits annually. Through these efforts, VFC mitigates the barriers to care commonly experienced by our service population, thereby establishing and strengthening the patient-centered relationships that improve our patients and our community's health and wellness.

CS 400.08 Twin Towers (4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles, CA

This rotation consists of jail-based medical care working with medical, nursing, mental health, social work, case management, and custody colleagues.

CS 400.09 Valley Community Healthcare (4.0 credit hours)

Grading Scale: P/F, Location: North Hills or North Hollywood, CA

Established in 1970, Valley Community Healthcare has committed to the well-being of low-income, medically underserved residents in North Hollywood, North Hills, and the surrounding communities. Our doctors and healthcare specialists annually serve 22,300 men, women, children, teens, and seniors. We aim to provide easily accessible, comprehensive, and affordable medical care to every family member while reducing visits to emergency rooms and urgent care facilities.

CS405.01 KPasa Medical Spanish/Community Medicine Rotation (8.0 credit hours) Grading Scale: P/F, Locations: KPSOM and Free Clinic of Simi Valley, Lestonnac Free Clinic, Valley Community Healthcare, or Venice Family Clinic

Prerequisite: Completing the CCLA and approval of Course Director(s).

Critical Care Selectives

CS 310.02 Emergency Medicine (5.0 credit hours)

Grading Scale: H/P/F, Location: Los Angeles Medical Center, Downey Medical Center, or San Bernardino County Medical Center

Medical students will rotate in a busy, urban KP emergency department during a four-week rotation. Medical students will perform at a sub-intern level, working closely with attending physicians in various clinical shifts/times. This selective is designed to be an immersive clinical experience in emergency medicine, focusing on developing diagnostic reasoning and management approaches, critical care, and medical resuscitation skills. Medical students will have opportunities to perform various medical procedures, including basic laceration repair, incision and drainage of abscesses, fracture reduction, central lines, airway management, and POCUS (point of care ultrasound). The emergency department provides a unique exposure experience to patients from all backgrounds. Opportunities for basic didactics will also be provided during the rotation. However, most of the learning will be in the clinical space working one-on-one with an attending.

CS 310.03 Intensive Care Unit (ICU) (5.0 credit hours)

Grading Scale: H/P/F, Location: Los Angeles Medical Center or San Bernardino County Medical Center

This selective will allow medical students to learn about and manage critically ill adults in the intensive care unit, rotating four weeks in a medical intensive care unit. Many of these patients will have multiorgan system dysfunction. Medical students will learn about critical care's multi-disciplinary, psychosocial, ethical, moral, and legal dimensions. The student will be responsible for initial primary

workups, evaluations, and continued management of ICU patients under resident and attending supervision. The student will be part of the ICU team of critical care attendings, senior residents, and interns. Medical students will develop skills in ventilator management and weaning protocols, interpret tests such as ABGs, EKGs, and CXR, and learn effective communication skills with patients and families.

CS 310.04 Neonatal Intensive Care Unit (NICU) (5.0 credit hours) Grading Scale: H/P/F, Location: San Bernardino County Medical Center

This selective will be a four-week selective that will approximate an intern's experience in the neonatal ICU. Medical students will be expected to take on primary responsibility for their patients. Medical students will have the opportunity to attend and partake in morning and evening sign-outs; participate in daily rounds; attend didactics; attend deliveries; gain experience with high-risk, full-term, and preterm neonates; provide education to families; coordinate care; and place consults with subspecialists. No call will be taken on this rotation. However, several shifts a week will extend into the evening hours to expose medical students to the differences between "day medicine" and "night medicine." By the end of the rotation, medical students should be able to perform a history and physical on a patient admitted to the neonatal ICU, recognize critical illness in the neonatal population, work on a multi-disciplinary team, understand resuscitation and life-support measures for neonatology, understand and manage basic ventilator settings, and have experience with end-of-life and goals-of-care discussions.

CS 310.05 Pediatric Intensive Care Unit (PICU) (5.0 credit hours) Grading Scale: H/P/F, Location: Los Angeles Medical Center or San Bernardino County Medical Center

The PICU critical care selective will be a four-week selective that will approximate an intern's experience in the pediatric ICU. Medical students will be expected to take on primary responsibility for their patients. Medical students will see a combination of critically ill patients and postoperative patients requiring close monitoring and care and patients requiring sedation for procedures and diagnostics. No call will be taken on this rotation. Medical students can attend and partake in morning and evening sign-outs, participate in daily family-centered rounds, attend didactics, provide education to families, coordinate care, and place consults with sub-specialists. By the end of the rotation, medical students should be able to perform a history and physical on a patient admitted to the pediatric ICU, recognize critical illness in the pediatric population, work on a multi-disciplinary team, understand resuscitation and life-support measures for pediatrics, and have experience with end-of-life and goals-of-care discussions.

Neurology Rotation (Two-Week Required)

CS 315.01 Neurology Rotation (2.0 credit hours)

Grading Scale: P/F, Location: Downey Medical Center, Los Angeles Medical Center, Panorama City Medical Center, South Bay Medical Center, or West Los Angeles Medical Center.

The two-week required neurology rotation will expose medical students to inpatient and outpatient neurology. Medical students will work with neurology attendings (and residents at one site) to evaluate hospitalized patients or patients who present to the neurology clinic. In the inpatient setting, medical students will work with teams to assess and care for patients with conditions such as stroke, seizure, brain tumor, and neurologic symptoms related to systemic disease. In the outpatient setting, medical students will be precepted in evaluating and treating patients with headaches, seizures, movement disorders, cognitive symptoms, and neurologic symptoms related to systemic disease.

Clinical Science Electives

CS 320.01 Addiction Medicine (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: KP Rehabilitation Pavillion (Orange, CA)

This elective rotation is an outpatient experience at KP Orange County with the Addiction Medicine department in Orange, CA. Students will rotate with Addiction Medicine Physicians to gain expertise in detoxifying and treating common Substance Use Disorders (SUDs) in the outpatient setting. Encounters will be a combination of in-person and telemedicine visits. This rotation will focus on SUD screening and history taking, diagnostic testing, treatment options for ordinary SUDs, and triaging for emergency management if required. Students will learn to apply standard screening tests such as the Alcohol Use Disorders Identification Test (AUDIT) or the Drug Abuse Screening Test (DAST-10). Students will learn the principles of Medication Assisted Therapy (MAT) in treating Alcohol and Opioid Use Disorders and gain clinical experience with MAT. Students will learn to interpret standard urine drug tests and their nuances. Students will gain an appreciation for common psychiatric comorbidities and Adverse Childhood Events often associated with SUDs. Students will learn about 42 CFR Part II and its implications for patient care in the primary care setting. The student must demonstrate respect, compassion, and integrity in caring for this vulnerable population. Students are also expected to acquire basic knowledge about the nuances of substance use risk assessment, prevention, and treatment for diverse populations, including pregnant women, children, adolescents, family members, the elderly, healthcare professionals, employees, and persons in the criminal justice system.

CS 320.02 Allergy or Immunology (4.0 credit hours)

Grading Scale: P/F, Location: Panorama City Medical Center and South Bay Medical Center Medical students will directly participate in ambulatory allergy clinics and inpatient consultations with faculty who love to teach. They will be exposed to 1) a wide range of common allergic conditions, 2) rare primary immunodeficiency disorders, and 3) diagnostic procedures specific to allergy and immunology.

Because of the high frequency of allergic disorders in the general population, this is an excellent elective for a student planning a career in primary care (medicine, pediatrics, family practice) and select specialties (e.g., dermatology and otolaryngology). This would be a good course for those wanting to pursue a career in allergy and immunology. The patient population is 50% adult and 50% pediatric.

CS 320.03 Anatomical Pathology (2.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center

This elective enables medical students to understand the role of microscopic examination, immunohistochemistry, and molecular analysis in diagnosing human disease. Medical students will attend daily "sign-out" sessions, participating in frozen section intraoperative diagnosis and fine-needle aspiration immediate evaluations. The pathology division handles a diverse variety of neoplastic and non-neoplastic human diseases. Medical students will learn about special techniques like immunohistochemistry, fluorescent microscopy, flow cytometry, and tissue processing. Upon completing this rotation, medical students will appreciate the implications of various diagnoses on patient management.

CS 320.04 Anesthesiology, Introductory (2.0 credit hours) Grading Scale: P/F, Location: Baldwin Park Medical Center or West Los Angeles Medical Center

This two-week elective in anesthesiology is for all Phase 3 medical students. This course is for any student interested in anesthesiology to help learn more about the field or supplement their medical knowledge and procedural skills for use in their future non-anesthesiology career. In this Basic Elective course, medical students will explore the breadth of perioperative medicine (i.e., preoperative assessment, intraoperative management, and postoperative care). Medical students will develop the foundational knowledge and skills to provide basic perioperative care.

During the 2-week course, medical students will work with anesthesiologists one-on-one to manage various operating room cases approximately five days a week, from 6:45 am to 3:00 pm. If there are interesting cases, medical students are encouraged to finish them to maximize their learning experience.

CS 320.05 Anesthesiology, Advanced (2.0 credit hours) Grading Scale: P/F, Location: Baldwin Park Medical Center or West Los Angeles Medical Center

This elective enables medical students to understand the role of microscopic examination, immunohistochemistry, and molecular analysis in diagnosing human disease. Medical students will attend daily "sign-out" sessions, participating in frozen section intraoperative diagnosis and fine-needle aspiration immediate evaluations. The pathology division handles a diverse variety of neoplastic and non-neoplastic human diseases. Medical students will learn about special techniques like immunohistochemistry, fluorescent microscopy, flow cytometry, and tissue processing. Upon completing this rotation, medical students will appreciate the implications of various diagnoses on patient management.

CS 320.06 Cardiac Care (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Kaiser Oakland Medical Center, Kaiser San Francisco Medical Center, and Kaiser Foundation Santa Clara Medical Center

The elective in cardiac care may include various areas of cardiology, including echo, cardiac MRI, treadmill stress testing, cardiopulmonary exercise testing, and inpatient and outpatient services. Third-year medical students will be exposed to many cardiology areas, including time rotating through echo, cardiac MRI, treadmill stress testing, cardiopulmonary exercise testing, inpatient cardiology consult service, and the cath lab.

Other skills include cardiovascular history taking and CV-focused exams, interpretation of EKGs, hand-held echocardiogram and interpretation, experiencing cardiac catheterization by scrubbing in on

a case and learning coronary anatomy and right heart catheterization hemodynamics. No call is required for this elective.

Third year students may only enroll in one two-week (2.0 credit hour) block. Four week blocks are open to fourth-year students only.

CS 320.07 Cardiology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students will have the opportunity to participate in all activities of a busy cardiac referral center, including observing diagnostic and interventional catheterization procedures, observing non-invasive studies (such as echocardiography, cardiac MRI and CT, and stress testing), and consulting on inpatients and outpatients under the supervision of a cardiology fellow and attending. Medical students will learn how common and important cardiac conditions are diagnosed and treated in adults.

CS 320.08 Cardiothoracic Surgery (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students in this elective will be part of an active cardiac surgery service, the largest one on the West Coast. This elective aims to give medical students an overview of cardiac surgical care and dispel some myths associated with heart surgery. The medical students will participate in the operating room, clinic, inpatient rounds, and potentially take call. Medical students will work as part of a team of attending surgeons and support staff. Since no residents are on the service, medical students can work with attendings one-on-one. There are two electives: a two-week rotation designed for medical students not interested in a surgical career but curious about heart surgery and a four-week rotation for medical students interested in surgery who want more exposure to the surgical subspecialty.

CS 320.09 Complex Care (2.0 credit hours)

Grading Scale: P/F, Location: KP Mid-Atlantic Permanente Medical Group (Holy Cross Hospital, Silver Springs, MD)

The complex care program is a focused healthcare delivery "Concierge" program for the sickest, most vulnerable patients in Mid-Atlantic states. Complex care physicians care for their patients with a team of case managers and nurses using the integrated model to support patients' needs. Complex care physicians hold office hours, make courtesy visits to the hospital, skilled nursing facilities, long-term care units, and assisted living facilities, and make home visits to see patients if needed.

The complex care program is an IRB research program that started in 2016 as a pilot. In 2017, after showing an 80% reduction in utilization for hospitalized patients, the program was regionalized and funded by nine full-time FTE positions for physicians covering the District of Columbia/suburban Maryland, Virginia, and Baltimore. Each complex care physician panels up to 200 patients. Since the beginning of the program, the complex care program has had 3,500 patients enrolled and currently has 1,500 living patients.

CS 320.11 Dermatology (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: San Diego Medical Center or South Bay Medical Center

The dermatology elective is a two or four-week rotation. Medical students will work with residents and faculty in ambulatory clinics. They will develop clinical skills in recognizing and describing skin morphologies, performing skin exams, and diagnosing and managing common skin conditions. This rotation offers experience in general dermatology, pediatric dermatology, procedural dermatology,

and dermatopathology. At the end of the rotation, medical students will give a case-based presentation.

CS 320.12 Emergency Medicine, Introductory (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: KP Modesto Medical Center

This two or four-week elective introduces third-year medical students to emergency medicine. It builds on the foundations of emergency medicine.

CS 320.13 Emergency Medicine, Advanced (4.0 credit hours)

Grading Scale: P/F, Location: KP Manteca Medical Center and KP Modesto Medical Center This elective is meant for medical students looking to specialize in emergency medicine. Medical students will see patients in the Modesto and Manteca emergency rooms, focusing on critical and trauma patients. During the rotation, there will be focused procedural, simulation, and ultrasound training, and medical students will participate in weekly didactics. There will be an end-of-rotation exam.

CS 320.14 Emergency Medicine, Point-of-Care-Ultrasound (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: KP Manteca Medical Center and KP Modesto Medical Center This elective introduces learners to the foundational tenets of bedside sonography and its application to clinical medicine. Learners will learn knobology and hands-on scanning in the KP Modesto and Manteca emergency departments. Obtained images will be reviewed by faculty, and feedback will be provided.

CS 320.16 Emergency Medicine Services (EMS) (2.0 credit hours) Grading Scale: P/F, Location(s): KP Modesto Medical Center

This two-week elective introduces learners to the basic tenets of pre-hospital care, triage, and principles of disaster management. It is currently offered in a hybrid format (virtual/in-person). Learners will also get to observe EMS operations through ride-along.

CS 320.17 Endocrinology (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students will be able to learn about the evaluation and management of endocrine conditions such as hypothalamic, pituitary, adrenal, thyroid, parathyroid, and gonadal disease. Medical students can participate in diabetes mellitus management in inpatient and outpatient settings. Medical students will also be able to care for patients undergoing gender-affirming care and hormone therapy. Medical students will provide consultative services in the inpatient and outpatient settings.

CS 320.18 Family Medicine (4.0 credit hours)

Grading Scale: P/F, Location: Orange County Anaheim Medical Center or Affiliated Medical Office Buildings

This four-week elective, located at the KP Family Medicine Residency program in Orange County, will be an elective rotation designed for medical students with a career interest in family medicine or other primary care specialties. Medical students will rotate through the residency program's primary care clinic at Santa Ana Medical Offices and the family medicine specialty clinics (OB, Gynecology, Pediatrics, Dermatology, Minor Surgery, Sports Medicine, Behavioral Medicine, and Palliative Care).

Medical students will spend three weeks doing outpatient primary care under the supervision of program faculty, volunteer attendings, and family medicine residents. The clinic will be scheduled for eight half days during those outpatient weeks, with a different attending physician each half day.

Medical students will be exposed to procedures, including Point-of-Care Ultrasound, minor skin surgeries, joint injections, and Long-Acting Reversible Contraception placement/removal.

Medical students will also spend one week rounding with our family medicine residents on our family medicine inpatient service at Anaheim Medical Center. Medical students may also be scheduled for at least one half-day at the Latinx Health Access (Lestonnac) Clinic with our community medicine fellow. If interested, medical students can spend a day at one of our urgent care centers with our teaching faculty. At the end of the rotation, the student will be expected to give a presentation (10 minutes, ten slides) about an interesting case to program faculty and residents.

CS 320.19 Family Medicine (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: San Diego (Clairemont Mesa Medical Office Building and Zion Medical Center)

This elective is a four-week rotation at the San Diego KP Family Medicine Residency program. It will be an elective designed for medical students with a career interest in family medicine or other primary care specialties. Medical students will rotate through the primary care clinic at the Clairemont Mesa Medical Office Building, a NextGen facility, and the family medicine specialty clinics (OB Centering, Gynecology, Dermatology, Minor Surgery, Sports Medicine) residency program.

Medical students will spend three weeks doing outpatient primary care under the supervision of program faculty, adjunct faculty, and family medicine residents. The clinic will be scheduled for eight half days in those outpatient weeks. There will be a different attending physician each half-day during the outpatient weeks. Medical students will be exposed to procedures, including Point of Care Ultrasound, minor skin surgeries, joint injections, and Long-Acting Reversible Contraception placement/removal.

Medical students will also spend one week rounding with the family medicine residents on the adult medicine inpatient service at KP Zion Medical Center. We plan to schedule medical students to attend one half-day of Asylum Seeker Clinic with our community medicine fellow and one half-day at our primary care clinic at La Maestra, our Federally Qualified Health Center partner. If interested, they can also spend a day at one of the urgent care centers with our teaching faculty.

Medical students will also complete a population health (quality improvement) project during their rotation and be supported to present it at future family medicine conferences if interested. Wednesday afternoons will be dedicated time for the population health project, and Friday afternoons will be for residency didactics. At the end of the rotation, the student will be expected to give a presentation (10 minutes, ten slides) about an interesting case from their elective and present their quality improvement project to faculty and residents.

CS 320.20 Gastroenterology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students will be able to gain an overview of gastrointestinal tract and liver diseases, including pathophysiology, diagnosis, and management. Medical students will consult on patients in the inpatient and outpatient settings and have the opportunity to attend multidisciplinary subspecialty clinics and endoscopies. As a tertiary referral center, medical students will be exposed to specialized procedures such as endoscopic ultrasound and retrograde cholangiopancreatography.

CS 320.21 General Surgery (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: San Bernardino County Medical Center

This elective is designed for medical students wishing for a more profound experience and practical application of the principles of general surgery. Medical students will participate in two- or four-week rotations in a general surgery that sees both complex tertiary referrals and more common pathology. Other team members will include the faculty members and, highly likely, residents. This small team will promote efficient learning and interaction with the surgeons based on an apprenticeship model. Medical students will participate in operating room cases, inpatient rounding, outpatient clinics, and didactic conferences. Within this elective, medical students may participate in general surgery/minimally invasive surgery, breast surgery, surgical oncology, or colorectal surgery. When schedules allow, a student may rotate in a specific rotation. Medical students will not be required to take overnight call.

CS 320.22 Genetics (Adult and Hereditary Cancer Focused) (2.0 credit hours) Grading Scale: P/F, Location: Glendale Molecular Genetics Pathology Laboratory, Los Angeles Medical Center, and Panorama City Medical Center

This elective is designed for future internal medicine or family medicine physicians or geneticists. Third- or fourth-year medical students will evaluate, diagnose, and disclose results in a two-week cancer genetics elective. This elective will focus on assessing patients with a personal or family history of cancer. This elective will reinforce the importance of taking a detailed family history, which is essential for all clinicians but particularly clinicians in primary care who need to recognize red flags in the family history concerning a hereditary cancer syndrome. Other specialties that care for patients with hereditary cancer syndromes and may benefit from this elective include hematology/oncology, gastroenterology, gynecology, general surgery, radiation oncology, and dermatology. Medical students will learn to draw a pedigree, assess genetic risk, and interpret genetic test results. Medical students will also spend one to two days learning about test methodology in the molecular genetics laboratory. Medical students will work primarily with one MD for the duration of the elective and genetic counselors. There will be no call on nights or weekends.

CS 320.23 Genetics (Prenatal) (2.0 credit hours)

Grading Scale: P/F, Location: Glendale Molecular Genetics Pathology Laboratory, Los Angeles Medical Center, and Panorama City Medical Center

Third or fourth-year medical students will evaluate, diagnose, and disclose results in a two-week prenatal genetics elective. This elective will focus on assessing prenatal patients for genetic conditions in the fetus, including a family history of genetic conditions, positive carrier screening, and positive screening for Trisomy 21 or other fetal anomalies. This elective will reinforce the importance of taking a detailed family history, which is essential for all clinicians, particularly clinicians caring for patients during pregnancy. Medical students will learn to draw a pedigree, assess genetic risk, and interpret genetic test results. Medical students will also spend one to two days learning about karyotype, FISH, microarray, and NIPT test methodology in the molecular genetics laboratory. Medical students will work with MDs in genetics, OB/GYN, and genetic counselors. There will be no call on nights or weekends.

CS 320.25 Hematology/Oncology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

Medical students will be able to gain an overview of benign and malignant hematologic disorders and develop an understanding of the diagnostic work-up, evaluation, and treatment of patients with common malignancies such as breast, lung, and colon cancer. Medical students will participate in the consultation and care of patients in the inpatient and outpatient settings. They will also attend multidisciplinary oncology conferences covering specialty areas such as breast cancer. Medical

students will learn about the research programs in hematology/oncology and how patients are evaluated for and managed while on clinical trial protocols.

CS 320.26 Infectious Disease (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: South Bay Medical Center

Medical students can provide consultative care to patients with suspected or proven infectious diseases in the inpatient and outpatient settings. Medical students will learn about evaluating unexplained fevers, failures of common infections to respond to therapy, uncommon or severe infections, treatment of multidrug-resistant organisms, and management of travel-related infections.

CS 320.27 Internal Medicine (Health Equity and Disparities) (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: KP Oakland Medical Center and Community Partners

This elective includes learning experiences focusing on our community's existing disparities and care provided through an equity lens to eliminate them. Student experiences may consist of time at our specialty blood pressure clinic, AA Diabetes, and HTN group visits, Salud en Espanol module (for Spanish-speaking medical students), and Chinese language module (for Cantonese and Mandarin-speaking medical students), Disparities curriculum sessions, and time at our community sites. Our community partnerships include Lifelong with locations like the Trust clinic, which cares for homeless and marginally housed populations and provides street medicine opportunities.

CS 320.28 La Salud Permanente LatinX Health (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Kaiser Permanente Fresno Medical Center

The La Salud Permanente Latinx Health Elective offers Spanish-speaking fourth-year U.S. medical school medical students and residents (PGY2 and above) passionate about Latino health a unique opportunity.

Throughout the highly personalized two or four-week program, medical students will use Spanish to work with primary care physicians and care for patients. Medical students will experience our integrated system, use the latest health technology, and learn from physicians committed to providing high-quality patient care. We will tailor medical students' experiences to suit their areas of interest. For example, medical students may participate in community health events, work within our Division of Research, help create cutting-edge patient resources, or pilot a performance improvement project in a specific area.

CS 320.29 Laboratory Medicine (2.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center and Regional Reference Laboratories (Chino Hills, Glendale, and North Hollywood)

This elective is designed to provide medical students with hands-on exposure to all major areas of the clinical laboratory, rotating through chemistry, hematology, immunology, microbiology, flow cytometry, blood bank, molecular oncology, molecular and biochemical genetics, and cytogenomics. The medical students will attend daily laboratory operations briefings and participate in relevant departmental technical meetings. There will be opportunities to participate in bi-monthly regional laboratory and infectious diseases (RLID) meetings and learn about emerging technologies (i.e., next-genome sequencing/NGS), clinical test performance and development, quality assurance, and laboratory stewardship. The faculty will vary from day to day. There will be no call or weekends.

CS 320.31 LGBTQ+ Care (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center and West Los Angeles Medical Center

This four-week elective offers medical students the opportunity to learn how to provide comprehensive healthcare to the LGBTQ+ population across multiple medical and surgical specialties. Medical students will work with multidisciplinary teams and providers in different clinical settings related to LGBTQ+ health, including but not limited to psychiatry/behavioral health, adolescent/young adult medicine, pediatrics, family medicine, internal medicine, endocrinology, plastic surgery, HIV/PrEP clinic, and work with the team at KP's Adult Transition Pathways Clinic/Pediatric GenderCare Clinic. The themes woven through the elective include person-centered and trauma-informed care, evidence-based practice, sex positivity, effective advocacy, systemic issues (e.g., access and barriers to care), intersectionality, and ethical issues. This elective empowers future physicians to be sensitive, comfortable, affirming, clinically knowledgeable, and culturally humble in providing health care to LGBTQ+ populations, particularly emphasizing the TGNB (transgender/non-binary) community.

CS 320.33 Community Engagement Clinic (2.0 credit hours) Grading Scale: P/F, Location: Kaiser Permanente West Oahu Medical Office

The primary objective of this elective is for learners to work with local faculty and staff in applying evidence-based knowledge about the social determinants of health in the formation of care delivery, research, policy, and/or program development for improving individual and population health and reducing health disparities for underserved populations.

Didactics, research, and community engagement activities are tailored to the learner's background and educational interests to support a better understanding of medicine in the local, underserved population. Clinic days with a physician introduce students to the application of evidence-based medicine in the local population.

CS 320.34 Nephrology (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students can provide consultative services to patients with kidney, electrolytes, and hypertensive diseases. Medical students will manage patients with acute or chronic kidney failure. Medical students will be taught the interpretation of blood tests, urine analysis, various imaging modalities, and biopsies used in the workup of kidney disease. Medical students will be introduced to dialysis and transplant and their role in managing advanced kidney failure.

CS 320.35 Neurology (Inpatient) (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: KP Modesto Medical Center

This two or four-week elective introduces third-year medical students to inpatient/hospital neurology. The rotation will involve rounding the neurologic consulted patient, including common conditions such as acute stroke, encephalopathy, status epilepsy, GBS, and other complicated cases. Medical students will develop skills in advanced in-patient neurologic diseases, consults for their symptoms, workup, diagnosis, and management. Medical students will also be exposed to and understand EEG, EMG, Botox, and occipital nerve block procedures.

CS 320.36 Neurology (Outpatient) (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: KP Modesto Medical Center

This two or four-week elective introduces third-year medical students to outpatient/clinic neurology. The rotation will involve teaching common neurologic diseases, developing advanced neurologic examination skills, and developing familiarity with neurologic disease symptoms, workup, diagnosis,

and management. This rotation also exposes medical students to neurology procedures, including EEG, EMG, Botox, and occipital nerve block.

CS 320.37 Neurology and Movement Disorders (4.0 credit hours) Grading Scale: P/F, Location: KP Northern California Comprehensive Movement Disorders Program

This elective includes a combination of inpatient and outpatient neurology. Medical students are paired with movement disorder subspecialists and neuromuscular specialists for outpatient. We offer memory disorder clinics, movement disorders, and inpatient and outpatient neurology. During two weeks of outpatient neurology and two weeks of inpatient, the experience includes inpatient hospital consults and follow-ups with neuro hospitalists. The outpatient experience consists of two weeks of clinic, emphasizing neuromuscular (with a neuromuscular subspecialist) and movement disorders (with a movement disorder subspecialist). Medical students will be watching EMGs and NCVs, Botox injections, and DBS programming and will see a mix of new and follow-up consultations.

CS 320.38 Neurosurgery (4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center

This neurosurgery elective is designed to give medical students interested in neurosurgery, otolaryngology, or neurology in-depth knowledge of the neurosurgery service. Medical students become an integral part of the neurosurgery service, assisting neurosurgery staff, mid-level providers, and residents in multiple subspecialty fields within neurosurgery. Activities include ward and ICU rounds, observing and assisting in the OR, taking call, and attending teaching conferences. The rotation will be tailored to the student's interests and includes one to two-week blocks for a four-week rotation.

CS 320.39 Neurosurgery (Functional) (2.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center and Woodland Hills Medical Center This neurosurgery elective in functional neurosurgery is designed to allow medical students going into neurology and neurosurgery to work with multidisciplinary teams to develop surgical solutions to neurological problems.

Medical students become an integral part of the neurosurgery service, assisting neurosurgery staff, mid-level providers, and residents in multiple subspecialty fields within neurosurgery. Activities include ward and ICU rounds, observing and assisting in the OR, taking call, and attending teaching conferences. The focus will be on deep brain stimulation and epilepsy surgery.

CS 320.40 Nuclear Medicine (2.0 credit hours)

Grading Scale: P/F, Location: San Bernardino County Medical Center

In this two or four-week elective for medical students interested in nuclear medicine, medical students will rotate on clinical nuclear medicine services, including general nuclear medicine, nuclear cardiology, and PET/CT, for focused instruction from the nuclear medicine faculty. Medical students will participate in the technical performance and diagnostic interpretation of a broad range of imaging studies covering various disorders, including cancer, cardiovascular disease, neurologic disorders, pulmonary, GI, GU, osseous, and endocrine diseases. Medical students will become familiar with the array of therapeutic nuclear medicine procedures to treat bone pain, metastatic bone disease, hyperthyroidism, thyroid cancer, metastatic neuroendocrine tumors, and certain hematologic malignancies. The objective of this elective is to acquaint medical students with the basic principles of nuclear medicine, the techniques used, the gamut of procedures available, and the decision-making used to select specific diagnostic or therapeutic procedures and interpret results. Medical students

who wish to pursue a career in nuclear medicine are encouraged to take a four-week elective for a more profound, immersive experience. This elective does not have any on-call responsibilities.

CS 320.41 Obstetrics and Gynecology (Inpatient) (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

Medical students will participate in the direct inpatient management of pregnant patients admitted to the antepartum service and care for patients admitted to labor and delivery. Medical students will be responsible for following patients postpartum until they are discharged home. Medical students will work with attending perinatologists and OB/GYNs. The second half of the elective will focus on the surgical aspects of gynecology. The student will assist in minor and significant gynecologic surgical procedures and following patients post-operatively. Medical students will be responsible for presenting a topic of choice at the department meeting at the end of their rotation.

CS 320.42 Occupational Medicine (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center and South Bay Medical Center Third- or fourth-year medical students will assess, diagnose, and plan to restore injured workers' health by applying systems-based practice in this two- or four-week elective course. This elective will focus on the information a non-occupational medicine physician must know for practice. This elective will reinforce musculoskeletal physical exam skills necessary for occupational medicine patient care competency. Medical students will learn to take an occupational history, assess physical function, and write meaningful activity prescriptions for injured workers.

Additionally, two and four-week medical students learn to perform practice-based learning and improvement, emphasizing time management skills within a busy clinical practice. The faculty will vary from day to day. This elective is outpatient, Monday through Friday.

CS 320.43 Ophthalmology (General) (2.0 credit hours) Grading Scale: P/F, Location: West Los Angeles Medical Center

This rotation will be a two-week elective in ophthalmology for medical students interested in learning core ophthalmology examination and management techniques (such as those going into primary care or emergency medicine). Medical students will rotate with attending physicians in general ophthalmology, cornea, glaucoma, retina, pediatric ophthalmology clinics, and operating rooms. Medical students will learn ophthalmology examination techniques (such as slit lamp examination) and the triaging, managing, and treating of common ophthalmology conditions. Some home call may be taken.

CS 320.44 Ophthalmology (Pediatric and Adult Strabismus) (2.0 credit hours) Grading Scale: P/F, Location: Orange County Anaheim Medical Center

This rotation is a two-week elective in ophthalmology for those medical students interested in pediatric ophthalmology (such as those intending to pursue family medicine or pediatric residencies as well as those going into ophthalmology residency who wish for a more in-depth experience in this sub-specialty) and strabismus/extraocular movements (including those medical students with interest in neurologic disorders). Medical students will spend time with pediatric ophthalmology and adult strabismus attending physicians in the clinic and operating room. Emphasis will be placed on learning examination and management skills for all pediatric ophthalmology patients and adults with ocular motility conditions. Some home call may be taken.

CS 320.45 Orthopedic Surgery/Sports Medicine (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective will be a four-week rotation to allow medical students interested in becoming orthopedic surgeons to understand better the foundation of orthopedics: trauma, sports medicine, and joint replacement surgery.

Medical students will work directly one-on-one with different attendings while doing orthopedic trauma, joint replacement surgery, and sports medicine. The goal is to understand better how to manage basic fractures, arthritis of the knee and shoulder, and sports injuries such as anterior cruciate ligament tears, meniscus tears, and labrum tears. We aim for the student to be directly involved in patient care and learn splinting techniques, basic suturing, and closed reductions.

The rotation is Monday through Friday and two weekend call days a month.

CS 320.46 Orthopedic Surgery/Sports Medicine (Nonoperative) (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This two-week elective is for medical students interested in the nonoperative side of orthopedics. This rotation is ideal for medical students who want to understand fracture management, arthritis, and sports medicine. This elective would be particularly applicable for medical students seeking to gain musculoskeletal knowledge for their future in fields like primary care and emergency medicine.

The medical student will work directly one-on-one with different attendings during this rotation doing orthopedic trauma, joint replacement surgery, and sports medicine. The goal is to understand better how to manage basic fractures, arthritis of the knee and shoulder, and sports injuries such as anterior cruciate ligament tears, meniscus tears, and labrum tears. We aim for the student to be directly involved in patient care and learn splinting techniques, basic suturing, and closed reductions.

The rotation is Monday through Friday and two weekend call days a month.

CS 320.47 Otolaryngology (Head and Neck Surgery) (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: KP Oakland Medical Center

Within the East Bay Head and Neck Surgery department, we offer the full breadth of Otolaryngologic clinical and surgical care with an outstanding educational curriculum for our residents and medical student rotators. Some of the surgeries we offer include oncologic surgery with microvascular reconstruction, craniofacial surgery, advanced otologic and sinus surgery, facial plastic and reconstructive surgery, facial feminization surgery, advanced voice and swallowing surgery, sleep apnea, and endocrine surgery. Our educational offerings include weekly protected education time led by our outstanding faculty, temporal bone dissection lab, journal clubs, cadaver labs, book clubs, airway simulation sessions, head and neck tumor board, and many multidisciplinary clinics (e.g., craniofacial clinic, skeletal dysplasia clinic, voice disorders clinic, sleep apnea clinic, cystic fibrosis clinic).

CS 320.48 Otolaryngology, Introductory (Head and Neck Surgery) (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

The otolaryngology elective will be a two-week course for medical students wishing for an introduction to otolaryngology and exposure to its breadth or medical students who have previously taken the selective and want to further solidify their learning or interest in the specialty. The elective will include both the outpatient clinic setting and the operating room setting. For de novo medical students, the experience will be with different attendings in different subspecialties daily, including time with the day

call attending learning about otolaryngologic emergencies and consults. Medical students will also participate in daily rounds with the otolaryngology service.

CS 320.49 Otolaryngology, Advanced (Head and Neck Surgery) (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

The advanced otolaryngology elective is for medical students who have completed the otolaryngology selective and will provide additional clinical and operative experiences to medical students within the various subspecialties of otolaryngology. Medical students will be taking overnight home call during the rotation.

CS 320.50 Palliative Care (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center and West Los Angeles Medical Center

Medical students will complete their clinical experience at various locations, including the Los Angeles and West Los Angeles Medical Centers, and home visits throughout the Los Angeles area. Students will be exposed to multiple clinical settings across the care continuum, including inpatient palliative medicine consults, outpatient palliative medicine clinics, post-acute facilities, home-based palliative care, and hospice. There will be an emphasis on providing evidence-based palliative care through an interdisciplinary team-based approach. Students will gain knowledge and skills in conducting treatment goals discussions and managing complex symptoms within the context of serious illness.

CS 320.51 Pediatric Cardiology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

During this elective, medical students will see various pediatric cardiology patients, ranging from new referrals from general pediatricians, continuity of care for established patients, new inpatient cardiology consults, and interventional cardiac procedures. Medical students should expect to gain an understanding of how to evaluate common topics such as, but not limited to, syncope, chest pain, and palpitations. Medical students should expect to see patients with diagnoses such as but not limited to myocarditis, congenital cardiac disease, and arrhythmias. Medical students will gain preliminary skills in echocardiograms and EKG reading. The faculty will be from the Division of pediatric cardiology. Medical students may also work with a resident if there is one on rotation during the student's rotation. There will be no call or weekends.

CS 320.52 Pediatric Endocrinology (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Downey Medical Center and Los Angeles Medical Center
During this rotation, medical students will see pediatric endocrinology patients, ranging from new
referrals from general pediatricians to continuity of care for established patients and new inpatient
consults. Medical students should expect to gain an understanding of how to evaluate common topics
such as, but not limited to, early/late puberty, short/tall stature, hypo/hyperglycemia, and early/late
menarche. Medical students should expect to see patients with diagnoses such as, but not limited to,
diabetes mellitus, thyroid disorders, adrenal axis disorders, and transgender care. Medical students
will also gain preliminary skills in diabetes education, insulin administration, and blood glucose
testing. The faculty will be from the Division of pediatric endocrinology. Medical students may also
work with a resident if there is one on rotation during the student's rotation. There will be no call or
weekends.

CS 320.53 Pediatric Hematology/Oncology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

During this elective, medical students will see pediatric hematology/oncology patients, ranging from new referrals from general pediatricians to continuity of care for established patients and new

inpatient consults. Medical students should expect to gain an understanding of how to evaluate common topics such as, but not limited to, anemia, leukopenia/neutropenia, and thrombocytopenia. Medical students should expect to see patients with diagnoses such as, but not limited to, sickle cell anemia, liquid and solid tumors, and thalassemia. There will also be opportunities to participate in new cancer diagnosis talks and end-of-life/palliative care discussions. Medical students will also gain exposure to the techniques of bone marrow aspirates and lumbar punctures. There may also be opportunities to work in pathology, laboratory medicine, and radiology as adjunctive specialties. The faculty will be from the division of pediatric hematology/oncology. Medical students may also work with a resident if there is one on rotation during the student's rotation. There will be no call or weekends.

CS 320.54 Pediatric Nephrology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Downey Medical Center

During this elective, medical students will see pediatric nephrology patients, including new referrals from general pediatricians, continuity of care for established patients, and new inpatient consults. Medical students should expect to gain an understanding of how to evaluate common topics such as, but not limited to, hematuria, hypertension, and proteinuria. Medical students should expect to see patients with diagnoses such as, but not limited to, nephrotic syndrome, nephritic syndrome, end-stage renal disease/chronic kidney disease, and congenital kidney disease. Medical students should also gain a preliminary understanding of dialysis.

The faculty will be from the Division of pediatric nephrology. Medical students may also work with a resident if one is on rotation during the student's rotation. There will be no call or weekends.

CS 320.55 Pediatric Neurosurgery (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective is designed for medical students interested in neurosurgery, pediatrics, or family medicine. Medical students will primarily work with two pediatric neurosurgeons at LAMC. Medical students become an integral part of the pediatric neurosurgery service, assisting neurosurgery staff, mid-level providers, and residents in multiple subspecialty fields within neurosurgery. Activities include ward and ICU rounds, observing and assisting in the OR, taking calls, and attending teaching conferences.

CS 320.56 Pediatric Pulmonology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

During this elective, medical students will see pediatric pulmonology patients, including new referrals from general pediatricians, continuity of care for established patients, and new inpatient consults. Medical students should expect to gain an understanding of how to evaluate common topics such as, but not limited to, hemoptysis, chronic wheezing, and apnea. Medical students should expect to see patients with diagnoses such as, but not limited to, bronchopulmonary dysplasia, cystic fibrosis, asthma, and interstitial lung disease. Medical students should also gain preliminary skills in performing and interpreting pulmonary function tests and bronchoscopies. The faculty will be from the Division of pediatric pulmonology. Medical students may also work with a resident if one is on rotation during the student's rotation. There will be no call or weekends.

CS 320.57 Pediatric Rheumatology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

During this elective, medical students will see pediatric rheumatology patients, including new referrals from general pediatricians, continuity of care for established patients, and new inpatient consults. Medical students should expect to gain an understanding of how to evaluate common topics such as,

but not limited to, arthritis, rashes, and prolonged fever. Medical students should expect to see patients with diagnoses such as, but not limited to, Lupus, JIA, and vasculitis. Medical students should also gain preliminary skills in thorough and specific physical exam skills and findings unique to rheumatology. The faculty will be from the Division of pediatric rheumatology. Medical students may also work with a resident if one is on rotation during the student's rotation. There will be no call or weekends.

CS 320.58 Physical Medicine and Rehabilitation (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Kaiser Permanente Kaiser Foundation Rehabilitation Center (Vallejo)

This two or four-week elective introduces medical students to managing traumatic brain injuries, spinal cord injuries, stroke, polytrauma, amputation, and other neurologic disorders in the acute inpatient rehabilitation setting. Medical students will become part of an inpatient interdisciplinary rehabilitation team and participate in the daily care of patients admitted to the acute rehabilitation hospital (including new admissions), nursing rounds, interdisciplinary team conferences, outpatient and consultative care, and journal club and grand rounds (when schedules allow). Medical students can also observe and assist in chemodenervation procedures, intrathecal baclofen pump management, and electrodiagnostic studies.

CS 320.59 Advanced Outpatient Musculoskeletal Clinic (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center/USC Arcadia Hospital

This two-week elective will offer a more in-depth experience in physical medicine and rehabilitation (PM&R), focusing on outpatient musculoskeletal care. Medical students will rotate with multiple PM&R faculty members. They will refine their history and physical examination skills, learn when and how to order, interpret musculoskeletal imaging studies, and practice point-of-care musculoskeletal ultrasound and interventional procedures. No call will be taken.

CS 320.60 Plastic and Reconstructive Surgery (Fundamentals) (4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center and West Los Angeles Medical Center

This rotation is a four-week clinical experience encompassing all aspects of plastic and reconstructive surgery, including general plastic surgery, reconstructive microsurgery, hand surgery, craniofacial surgery, gender affirmation surgery, and aesthetic surgery. Medical students will learn the fundamental principles of surgical reconstruction through didactic education, outpatient clinical experiences, and hands-on intraoperative participation. There will also be opportunities to learn and practice surgical skills such as suturing and knot tying. Expert faculty will teach the course from all subspecialties of plastic surgery. Medical students will also learn from plastic surgery and general surgery resident physicians. At-home night or weekend call may be taken with a resident and attending supervision. The elective is designed for medical students entering any field interested in learning more about surgery fundamentals, developing basic surgical skills, or exploring surgical specialties.

CS 320.61 Plastic and Reconstructive Surgery (Advanced) (4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center and West Los Angeles Medical Center

This elective is a four-week clinical experience encompassing all aspects of plastic and reconstructive surgery, including general plastic surgery, reconstructive microsurgery, hand surgery, craniofacial surgery, gender affirmation surgery, and aesthetic surgery. Medical students will learn the fundamental principles of surgical reconstruction through didactic education, outpatient clinical experiences, and hands-on intraoperative participation. Medical students will also be able to focus on specific subspecialties of plastic and reconstructive surgery. There will be opportunities to learn and

practice surgical skills such as suturing and knot tying. Expert faculty will teach the course from all subspecialties of plastic surgery. Medical students will also learn from plastic surgery and general surgery resident physicians. At-home night or weekend call may be taken with a resident and attending supervision. The elective is designed for medical students interested in entering the field of plastic surgery or applying to a surgical residency program.

CS 320.62 Precision Medicine (2.0 credit hours)

Grading Scale: P/F, Location: KPSOM, Glendale Molecular Genetics Pathology Laboratory, Los Angeles Medical Center, Panorama City Medical Center, and South Bay Medical Center Precision medicine's rapidly evolving and transformative potential is transforming healthcare from a one-size-fits-all approach to a more tailored approach through a better understanding of individual variability and its effect on disease onset, progression, prevention, and treatment. In doing so, we are overcoming the limitations of traditional medicine rooted in chronic disease management and moving toward more precise, predictable, and powerful health care that is patient-focused and personalized.

Medical students will be exposed to disruptive technologies in precision medicine, including artificial intelligence, gene editing/engineering for curative intent, microbiome, and disease, advances in drug development (i.e., immunotherapy, psychedelics, targeted therapies), biomarkers, gene expression profiling, proteomics, metabolomics, and pharmacogenomics, all as they relate to the biology of diseases such as cancer, cardiovascular disease, infectious diseases, stroke, or diabetes. Medical students will be exposed to counseling and communication skills and ethical, legal, and social issues encountered in personalized medicine.

The course will include seminars, interactive teaching with a discussion of theoretical and clinical cases, and independent learning modules. Clinical rotations (no-call) through outpatient medical genetics, cancer medicine, and the regional molecular pathology lab will use a hands-on approach to learning. Medical students will understand what it means to approach clinical care with a precision medicine approach. Internal faculty will be from cancer medicine, medical genetics, laboratory medicine, pathology, national pharmacy, and basic science departments. There will be outside guest lectures from the pharmaceutical/biotechnology sectors.

This course dramatically impacts medical students interested in internal medicine, pediatrics, neurology/neuropsychiatry, pathology, oncology, medical genetics, obstetrics, academic medicine, and clinical research.

CS 320.63 Psychiatry (Child/Adolescent) (4.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

This course has been designed to expose the student to inpatient, consult liaison (CL), and outpatient settings where child psychiatrists function. Medical students will gain exposure to the psychiatric assessment and treatment of children and adolescents and learn to function as part of an interdisciplinary team.

CS 320.64 Psychiatry (Consult Liaison) (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

This elective allows medical students to experience psychiatry in general hospitals by interviewing patients in inpatient medical-surgical wards and emergency rooms. They will formulate differential diagnoses, assessments, and treatment recommendations with a psychopharmacologic and behavioral focus. Common diagnoses include delirium, dementia, mood disorders, substance use, and personality disorders.

CS 320.65 Psychiatry (Inpatient) (4.0 credit hours)

Grading Scale: P/F, Location: Kaiser Mental Health Center (Los Angeles)

Medical students can work in a multidisciplinary team of social workers, nurses, and physicians. They will carry four patients during their elective and be responsible for their initial and follow-up treatment plans. This elective provides intensive exposure to a broad spectrum of conditions encountered in inpatient public psychiatry. The most prevalent disorders are schizophrenia, substance dependence, PTSD, mood disorders, panic disorders, eating disorders, and personality disorders. Medical illnesses often complicate psychiatric disorders. Treatments include psychopharmacology, supportive therapy, milieu therapy, and group therapy.

CS 320.67 Pulmonology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: South Bay Medical Center

Medical students will provide consultative services to patients with a broad spectrum of pulmonary diseases in the inpatient and outpatient settings. Medical students will be exposed to lung diseases, including COPD, lung cancer, interstitial lung disease, sarcoidosis, and pulmonary embolism. Medical students can participate in multidisciplinary conferences and observe pulmonary procedures, including bronchoscopy, thoracentesis, and transthoracic lung biopsy. Medical students will also be able to rotate in the pulmonary physiology laboratory.

CS 320.68 Radiation Oncology, Introductory (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students will participate in a two-week outpatient rotation in the Radiation Oncology Department, where they will develop an understanding of the role of radiation therapy in multidisciplinary oncologic care. This elective is an ideal rotation for medical students who plan to practice in fields adjacent to radiation oncology, including but not limited to medical oncology and surgical oncology. Medical students will be directly involved in patient care under the supervision of an attending physician and/or resident and learn how to obtain an oncologic history and physical and use relevant literature to make evidence-based treatment recommendations. Medical students will participate in multidisciplinary clinics, biweekly case conferences, and didactic conferences. Medical students will be exposed to the various modalities of radiation delivery, including external beam radiotherapy, stereotactic body radiotherapy, LINAC-based stereotactic radiosurgery, and interstitial and intracavitary brachytherapy. Medical students will participate in radiation planning and learn how to delineate target volumes and determine plan-specific normal tissue constraints.

CS 320.69 Radiation Oncology, Advanced (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students will participate in a two-week outpatient rotation in the Radiation Oncology Department. Eligible medical students must intend to apply to radiation oncology residency and have completed the four-week radiation oncology selective before enrolling in this elective. Medical students will further their understanding of specialized radiation technologies by participating in a two-week rotation with our stereotactic radiosurgery or brachytherapy groups.

Medical students electing to enroll in the stereotactic radiosurgery elective will further their understanding of the indications of applying this advanced technology in various malignant and benign conditions. Medical students will participate in new patient consultations in the weekly Radiosurgery Multidisciplinary Clinic and formulate assessments and treatment recommendations. Medical students will work with our physicians and physicists during the planning and treatment of stereotactic radiosurgery and fractionated stereotactic radiotherapy cases. Medical students will also participate in post-treatment follow-up and imaging surveillance in our Radiosurgery Follow-up Clinic.

Medical students electing to enroll in the brachytherapy elective will develop an understanding of the indications for brachytherapy in managing various genitourinary and gynecologic malignancies. Medical students will participate in new patient consultations in the weekly Genitourinary and Gynecologic Malignancy Multidisciplinary Clinics and formulate assessments and treatment recommendations. Medical students will participate in brachytherapy planning and observe intracavitary and interstitial brachytherapy procedures.

CS 320.70 Radiology, Basic (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective is a two-week general introduction to radiology for medical students planning to pursue specialties other than radiology but who would like a basic understanding of the breadth of radiologic imaging to help them in their preferred field.

Medical students in all radiology electives will observe and shadow radiologists and radiology residents as they work in real-time critical in-patient settings, stat outpatient settings, and other non-emergent outpatient settings. This may include medical students sitting at their PACS workstation, working alongside staff to give real-time, prospective readings and differential diagnoses. Medical students will be exposed daily to numerous staff radiologists in all specialty fields and radiology residents. Medical students may observe different radiology procedures, such as breast biopsies, fluoroscopy, and pediatric fluoroscopy procedures. They may perform small tasks during mammography and fluoroscopy procedures.

CS 320.71 Radiology, Advanced (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective is a two or four-week advanced route for medical students planning a specialty route other than radiology who want to bolster their knowledge of their preferred specialty with more advanced radiologic imaging.

Medical students in the four-week elective must present a 10-minute, 10-slide PowerPoint presentation on a topic of their choice (images provided by staff). This will be presented to staff and radiologists during a noontime lecture in their 3rd or 4th weeks.

Medical students in all radiology electives will observe and shadow radiologists and radiology residents as they work in real-time critical in-patient settings, stat outpatient settings, and other non-emergent outpatient settings. This may include medical students sitting at their PACS workstation, working alongside staff to give real-time, prospective readings and differential diagnoses. Medical students will be exposed daily to numerous staff radiologists in all specialty fields and different radiology residents. Medical students may observe different radiology procedures, such as breast biopsies, fluoroscopy, and pediatric fluoroscopy procedures. They may perform small tasks during mammography and fluoroscopy procedures.

CS 320.72 Rheumatology (4.0 credit hours)

Grading Scale: P/F, Location: Orange County Anaheim Medical Center

Medical students can provide consultative services to patients with connective tissue diseases and arthritis in inpatient and outpatient settings. Medical students will learn how to evaluate patients, interpret common rheumatologic serologies, improve their diagnostic acumen of rheumatologic disease, and become proficient in the physical exams of the musculoskeletal system. Medical students will learn about the mechanisms of actions and indications of medications that treat rheumatic and musculoskeletal diseases. Medical students will learn the techniques of joint and soft

tissue injections and special skills such as reading X-rays of joints, examining joint fluid, and aspiration of joint effusions.

CS 320.73 Sports Medicine (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: San Bernardino County Medical Center

This elective is a two- or four-week sports medicine rotation at KP San Bernardino County and affiliated sites of the Fontana KP Sports Medicine Fellowship program. Medical students will become familiar with the assessment and management of medical and musculoskeletal conditions of athletes of all ages and become proficient in examining and treating various musculoskeletal conditions of the athlete. Medical students will be exposed to multiple procedures, including diagnostic and therapeutic point-of-care ultrasound, joint aspirations and injections, dry needling tenotomy, trigger point injections, fracture management, bracing, and casting. Medical students will rotate through a sports medicine clinic with teaching faculty and fellows, attend training rooms at high school and collegiate athletic departments, participate in pre-participation screenings/physicals, and attend live sporting events to learn sideline management of common acute sports injuries such as concussions and joint trauma. Medical students will also participate in Journal Club and Radiology Rounds, with the opportunity to learn how to read X-ray and MRI studies.

CS 320.74 Urgent Care (4.0 credit hours)

Grading Scale: P/F, Location: Downey Medical Center and Riverside Medical Center

Medical students will rotate through our urgent care centers with different attending physicians. Medical students will learn to identify and treat urgent medical cases in a fast-paced environment and document findings efficiently in the electronic health record. Medical students will be exposed to various procedures, including incision and drainage of abscesses, suturing, wound debridement, joint injection, and aspiration, anoscopy, slit-lamp examinations of the eye, and fracture management. Medical students will learn to take problem-focused histories, formulate a differential diagnosis, order and interpret lab work and imaging studies, and rule out red flags requiring higher care. There will be some overlap between outpatient primary care and urgent care cases.

CS 320.75 Urology (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center

Medical students rotating with the Department of Urology will have an immersive experience encompassing all aspects of urology, including urologic oncology and robotics, endourology, pediatric urology, female pelvic and reconstructive urology, neuro-urology, men's health and infertility, and interventional radiology. Medical students will rotate in the clinic and operating room with ten fellowship-trained attendings and a stellar cadre of resident physicians. A wide array of urologic pathology will be encountered. Medical students will spend three-fourths of their time in the OR and one-fourth in the clinic.

The mission of the KP urology program is to provide the best urological exposure to guide and inform a potential career in urology. Our program will give medical students a robust educational experience in operative, procedural, and office urology. Medical students will have first-hand experience with diverse patients and disease processes. Medical students will be introduced to important topics and concepts, including medico-legal considerations, leadership, teamwork, compassion, and grit. In addition, interested medical students will have opportunities to perform clinical and epidemiological research.

Medical students will participate in educational conferences through clinical presentations, lectures, reviews of recent literature, discussions of research projects, and imaging and pathology review. Patient rounds are made daily, and grand rounds are held weekly, during which medical students,

residents, and attending physicians are free from all clinical duties. Medical students participating in four-week rotations will craft a presentation on a topic of their choice and present it at an educational conference during the last week of their rotation. In addition, four-week rotators are expected to take call for at least one week during rotation.

CS 320.76 Vascular and Interventional Radiology (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective will be a two-week rotation at LAMC primarily focused on introducing VIR to medical students planning to pursue non-procedural medical specialties (e.g., family medicine, outpatient internal medicine, hospitalist medicine).

CS 320.77 Vascular and Interventional Radiology (4.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective will be a four-week rotation at LAMC, allowing medical students to experience the entire breadth and depth of vascular and interventional radiology. Key components will include hands-on experience with image-guided interventions, including as primary operator on select procedures by the end of the rotation. There will also be robust experience on the inpatient VIR consult service and experience working in an outpatient VIR clinic.

Medical students will spend time in some manner with all VIR faculty. However, they will spend relatively more time engaging with core faculty members (KP-SOM faculty, VIR residency program director, and VIR residency associate program director) in dedicated VIR didactic sessions and outpatient clinics and scrubbed in on image-guided interventions. They will be responsible for seeing patients, evaluating imaging, and determining an assessment and plan for those patients, after which they will present to the VIR faculty. On the inpatient side, they will primarily see consultations (integrating clinical, exam, and advanced imaging findings) and develop independent assessments and plans. They will also be responsible for following patients that require it and all patients on whom they have intervened.

Each week will require 0.5-1 day in the VIR clinic with two faculty members. There will be additional outpatient clinic experiences in vein and vascular birthmark clinics. Daily procedure time will be split between outpatient and inpatient procedures.

CS 320.78 Vascular Surgery (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

Medical students in this elective will be part of a busy vascular surgery service, caring for complex disease processes and common pathology. The rotation can be two or four weeks long in an office-based clinic, the operating room, and inpatient rounds. Call is optional but encouraged. Medical students will be introduced to all aspects of vascular surgery, including peripheral vascular disease, abdominal aortic aneurysms, and venous disorders. Medical students will also participate in educational conferences and be encouraged to learn about pre-operative workups, including imaging studies. They will be part of a team of attending surgeons, residents, and support staff.

CS 320.79 Virtual Medicine Center (2.0 credit hours) Grading Scale: P/F, Location: Mira Loma Call Center

The two-week elective at the Virtual Medical Center in KP SCAL is designed for medical students who want to understand virtual care more deeply. The student will spend focused days in adult primary care, pediatrics, psych, dermatology, and home health. The student will also better understand the legal issues involved in offering virtual care across the continuum. Lastly, the student will have the opportunity to work with the leadership at the VMC and understand the KP strategy of

setting up an entire environment around virtual care, which includes the intake, the visit itself, the follow-up, and the use of artificial intelligence to improve the health of our members.

CS 320.80 Women's Health (Ambulatory-Based) (2.0 credit hours) Grading Scale: P/F, Location: San Bernardino County Medical Center

This elective is designed for medical students pursuing obstetrics and gynecology careers. During this ambulatory-based elective, medical students will receive a multidisciplinary experience throughout various subspecialties in OB/GYN. Medical students will participate in procedural-based clinics that will give them further exposure to women's health and common procedures in OB/GYN. Medical students will learn about and participate in prenatal ultrasounds, LARCs, endometrial biopsies, colposcopies, LEEPs, and obtaining cervical cytology specimens. Medical students will also participate in initial consultations and see prenatal patients as part of this immersive ambulatory experience.

CS 320.82 Medicine Under Austere Conditions (2.0 credit hours) Grading Scale: P/F, Location: KPSOM, San Bernardino County Medical Center, and Ontario Fire Department

This elective gives medical students the skills, knowledge, and ability to practice medicine outside the traditional setting for austere condition emergencies. The pedagogical approach to this course will be primarily centered around experiential learning and supplemented by didactic instruction and student-directed learning. Medical students will train as Wilderness First Responders through the National Outdoor Leadership School (NOLS) or equivalent training by faculty and associate experts. There will be both didactic and simulation-based learning that covers infection control and wound management, spinal cord injury, fractures, CPR, and management of allergies and anaphylaxis in the wilderness setting. In addition, medical students will learn about urban emergencies by discussing methods and ethics of triaging, communication, the development of temporary infrastructure in response, and maintaining safety in the urban setting. Medical students will also learn about human-caused incidents, including mass shootings, train/bus collisions, chemical spills/hazardous material exposure, and natural disasters such as earthquakes, wildfires, floods, and infectious outbreaks.

CS 320.83 Maternal Fetal Medicine (4.0 credit hours) Grading Scale: P/F, Location: KP Santa Clara Medical Center

Medical students will work as a member of the Obstetrics team, including Stanford medical students and KP Santa Clara Ob/Gyn Residents. Students will be supervised by the MFM attending of the week. The experience includes bedside rounding on high-risk antepartum patients, scrubbing into cesarean deliveries, seeing high-risk consults, and participating in clinical research if interested. The expected time commitment is typically Monday through Friday from 7 am to 6 pm, with no weekends or overnight calls.

CS 320.84 Internal Medicine Foundations of Ultrasounds and Procedures (2.0 - 4.0 credit hours) Grading Scale: P/F, Location: KP Santa Clara Medical Center

Medical students will rotate on the Procedure and Point of Care Ultrasound Services. Initially, they will gain foundational experience using Point of Care Ultrasound at the bedside alongside our Internal Medicine Residents to augment the physical exam as appropriate for the clinical scenario. They will learn the significance of findings on IVC assessments, cardiac exams, and pulmonary exams. On the procedure service, students will work one-on-one with Hospital Medicine Faculty and continue to gain experience in bedside ultrasound and using anatomical landmarks in bedside procedures. In addition, they will learn how to obtain informed consent, communicate indications and complications of procedures, and interpret images and diagnostic findings related to that procedure. Procedures encountered include paracentesis, thoracentesis, and lumbar puncture.

CS 320.85 Thoracic Surgery (2.0 credit hours)

Grading Scale: P/F, Location: KP Oakland Medical Center

This elective is for medical students who seek to learn more about the field of thoracic surgery. Our practice consists of five full-time KP Oakland attending thoracic surgeons, two full-time thoracic Physician Assistants, and a full thoracic UCSF-EB general surgery resident rotation consisting of one R4 and one R1. We perform over 100 thoracic surgery cases every four weeks and operate every day of the week. This rotation consists of inpatient care and outpatient care. It is heavily weighted on the operative experience in the OR, particularly emphasizing OR technical skills for medical students. Students will round with the team, manage inpatients, scrub, and actively participate in the OR five days a week. Students will also manage outpatients in the clinic for various thoracic disease processes, including lung cancer, esophageal cancer, thymoma, mesothelioma, pneumothorax, pneumonia, pleural effusions, chylothorax, chest wall disease and infections, esophageal perforation, and chest trauma. The thoracic surgery team also provides educational didactic learning and mandatory conference and tumor board presentations one-half day a week, every Thursday morning. An apprenticeship model is also possible if the student has a more specific clinical interest in thoracic surgery.

CS 320.86 Nephrology (2.0 or 4.0 credit hours)

Grading Scale: P/F, Location: KP Modesto Medical Center

This two or four-week medical student elective introduces fourth-year medical students to nephrology outpatient and inpatient care, including hemodialysis and peritoneal dialysis. Medical students will perform inpatient and outpatient nephrology consultations addressing acute kidney injury and chronic kidney disease management, including post-kidney transplant care, dialysis management, uncontrolled hypertension, recurrent nephrolithiasis, and electrolyte disturbances. Students will also learn how population management may be utilized to manage chronic medical conditions through teamwork with various health professionals, including nurses and dieticians. No call, no weekends.

CS 320.87 Physical Medicine and Rehabilitation (2.0 credit hours) Grading Scale: P/F, Location: KP Oakland Medical Center

Medical students will spend one week with Dr. Bailowitz and one week with Dr. Kandil learning about their approach to sports and spine/pain medicine with a physiatric background. The student will be expected to see patients in the clinic to expand their knowledge of neuromusculoskeletal history and physical exams. They will get exposure to fluoroscopic- and ultrasound-guided procedures. They will also be able to work in a multidisciplinary pain clinic, observe physical therapy sessions, and work on the sidelines of sporting events if in season.

CS 320.89 Family Medicine (4.0 credit hours)

Grading Scale: P/F, Location: KP Ranier Medical Center (Seattle, WA)

Kaiser Permanente Washington is a non-profit health maintenance organization with a strong focus on family medicine clinicians offering a broad spectrum of care. Kaiser Permanente Washington Family Medicine Residency at Seattle (KPWA FMR) is among the first family medicine programs in the nation and was involved in establishing the American Board of Family Medicine. The residency program has 18 residents, 12 physician faculty members, 2 behavioral science faculty members, and a full complement of nursing and administrative support staff. Clinic facilities include exam rooms, administrative offices, a lab, minor surgery, a medical library, and a pharmacy.

Medical students can access state-of-the-art resources, including an evidence-based medicine database, nationally respected treatment guidelines developed from comprehensive, physician-led reviews of best-available research, and EpicCare. This advanced electronic clinical information

system supports greater accessibility, coordination, and patient confidentiality system-wide. Kaiser Permanente Washington is a national leader in adopting medical home and virtual visits that are essential to the interaction between providers and patients.

This rotation has been designed to allow medical students to train in a small primary care practice that serves a diverse patient population, work closely with a small group of family physicians, and provide state-of-the-art primary care in an integrated care delivery system. The rotation will occur at Kaiser Permanente Rainer Medical Center in the Rainier Valley of South Seattle. Medical students will also be able to work with residents and faculty at the residency clinic sites in Capitol Hill and Burien.

The lead faculty will be Patricia Egwuatu, DO, and medical students can rotate with the Kaiser Permanente Rainier Valley Family Medicine Clinic faculty. Site community leads will be Denise Yu, MD, and Ling Lee, MD. Students can work with these community leads and other providers at this clinic. Medical students will learn to evaluate and treat the patient's clinical/medical presentation and the patient with cultural humility and address the social determinants of health and barriers affecting our communities health. The family medicine rotation at Kaiser Permanente Washington is an outpatient clinical experience. The rotation will take place at our Rainier Valley locations. Clinic shifts occur half-days, from 8:00 am – 12:00 pm to 1:00 pm – 5:00 pm. Students will join the KPWA FMR for didactics each Wednesday afternoon.

CS320.90 Family Planning (2.0 credit hours)

Grading Scale: P/F, Location: KP Orange County Anaheim Medical Center

This elective will take place at Kaiser in Orange County. Medical students will work closely with a Family Planning trained physician with a robust Family Planning practice. Students will see patients in both the inpatient and ambulatory spaces. This elective experience includes but is not limited to complex family planning clinics, participation in surgical and medical terminations, and contraception counseling. Medical students will learn about the complexities of contraception counseling in high-risk patients with multiple comorbidities and also learn about termination counseling and procedures. This family planning elective will allow participants to present a family planning topic of interest to the OB/GYN department during a monthly conference.

CS 320.91 Global Health Rotation (4.0 credit hours) Grading Scale: P/F, Location: Moi University School of Medicine and Moi Teaching and Referral Hospital (Eldoret, Kenya)

This four-week elective in global health will be available to fourth-year medical students during the fall semester. The elective will take place at our partner institution, Moi University School of Medicine (MUSM) and Moi Teaching and Referral Hospital (MTRH) in Eldoret, Kenya, through our membership in the AMPATH (Academic Model Providing Access to Healthcare) Consortium. Medical students will partner with MUSM students and rotate with multidisciplinary teams on the internal medicine or pediatric inpatient wards at MTRH, with some additional outpatient (e.g., HIV clinic) or sub-specialty clinical activities once per week. MUSM and KPSOM faculty will jointly provide clinical supervision, oversight, and teaching. Medical students will be expected to participate in morning reports, lunch conferences, and other educational offerings. Note that pre-departure orientation, training, and post-rotation reflections are required. An application process, including interviews, is also required for the elective.

CS 320.92 Child Neurology (2.0 credit hours)

Grading Scale: P/F, Location: Los Angeles Medical Center

The two-week elective Child Neurology rotation will expose medical students to inpatient and outpatient child neurology. Medical students will work with neurology attendings and residents to evaluate hospitalized patients or patients that present to the neurology clinic for evaluation. In the inpatient setting, medical students will work with teams to assess and care for patients with conditions such as stroke, seizure, brain tumor, genetic and metabolic conditions, and neurologic symptoms related to systemic disease. In the outpatient setting, medical students will be precepted in the evaluation and treatment of patients with headaches, seizures, movement disorders, neuromuscular disorders, developmental disorders, and neurologic symptoms related to systemic disease.

CS 320.94 Mother Baby Elective (4.0 credit hours)

Grading Scale: P/F, Locations: Emory Decatur Hospital (Decatur, GA); Northside Hospital (Atlanta, GA); Kaiser Permanente Crescent Medical Center (Tucker, GA)

This four week rotation provides medical students the opportunity to spend mornings rounding with the pediatrician in the newborn nursery and afternoons with the midwives and assisting with scheduled c-sections. On morning rounds, medical student will perform well baby exams, assist with lactation consultations, learn about perinatal risk factors and common problems in the newborn such as jaundice, hematological and infectious diseases. Medical students will also interact with many families from diverse backgrounds. Students will be expected to perform a history and physical, interpret results of common diagnostic tests, demonstrate good communication skills with patients and families and present organized verbal and written summaries of the history, physical and management plans. PM sessions to be determined by GYN.

CS 320.95 Gynecologic Surgery (4.0 credit hours)

Grading Scale: P/F, Locations: Atlanta Outpatient Surgery Center (Sandy Springs, GA); Emory Decatur Hospital (Decatur, GA); Emory Spivey Station Surgery Center (Jonesboro, GA); Northside Hospital (Atlanta, GA); KP Procedure Suites

Medical students will hone the skills necessary to take a comprehensive medical history, perform a physical exam, demonstrate the ability to effectively communicate with patients, formulate differential diagnosis and plans of care. Students spend one week on labor and delivery where they will learn how to evaluate patients in triage, take appropriate histories, manage laboring patients, observe and assist in cesarean and vaginal deliveries, and participate in antepartum and postpartum rounds. Students will spend three weeks of the working alongside maternal fetal medicine, genetic counselors, and general obstetricians in high-risk clinics. Students will shadow specialists, sit in on consultations, counseling, and ultrasounds. Students will have weekly didactics and one suture workshop.

CS 320.96 High Risk Obstetrics (4.0 credit hours)

Grading Scale: P/F, Location: Emory Decatur Hospital (Decatur, GA); Northside Hospital (Atlanta, GA); KP Brookwood (Atlanta, CA); KP Glenlake Comprehensive Specialty Center (Sandy Springs, GA)

Medical students will work with general gynecologists and subspecialists to observe and assist in major and minor surgical cases (e.g., laparoscopy, laparotomy, hysterectomy) and outpatient procedures (e.g., hysteroscopy, ablation). Medical students will also participate in office procedures (e.g., colposcopy, ultrasound, endometrial biopsies). This elective will provide students with vast exposure of the practice of acute and preventive women's health care. Students will have weekly didactics and one suture workshop.

CS 320.97 General Pediatrics (4.0 credit hours)

Grading Scale: P/F, Locations: Kaiser Permanente Gwinnett Comprehensive Medical Center (Duluth, GA); Kaiser Permanente TownPark Comprehensive Medical Center

Medical students will work in a busy pediatric primary care and urgent care setting. In the primary care clinic, medical students will learn the components of a pediatric health supervision visit including health promotion, disease and injury prevention, normal growth and development, the use of screening tools and immunizations for infants, children and teens. Additionally, students will assist with the management of common chronic conditions in childhood such as asthma, atopic dermatitis, ADHD, depression, autism and other developmental disabilities, etc. In urgent care, the focus will be on management of acute conditions in children including respiratory and infectious diseases, assessment of mild trauma as well as others. Medical students will be expected to perform age-appropriate history and physicals, interpret results of common diagnostic tests, demonstrate good communication skills with patients and families and present organized verbal and written summaries of the history, physical and management plans.

CS 320.98 General Pediatrics Specialty Rotation (4.0 credit hours)

Grading Scale: P/F, Locations: Kaiser Permanente Cascade Medical Center (Atlanta, GA); Kaiser Permanente Crescent Center Medical Center (Tucker, GA); or Kaiser Permanente Glenlake Comprehensive Medical Center (Sandy Springs, GA)

Medical students will gain experience in a busy primary care clinic and spend time in different specialty clinics in KPGA, including pediatric cardiology, pediatric obesity clinic, lactation clinic and developmental clinic where our ASD evaluations are completed. In the primary care clinic, students will learn the components of a pediatric health supervision visit including health promotion, disease and injury prevention, normal growth and development, the use of screening tools, and immunizations for infants, children and teens. Additionally, medical students will assist with management of common chronic conditions in childhood such as asthma, atopic dermatitis, ADHD, depression, autism and other developmental disabilities, etc. Students will also manage acute illness in children including common respiratory diseases, infectious diseases, rashes, mild trauma, etc. Medical students will be expected to perform age-appropriate history and physicals, interpret results of common diagnostic tests, demonstrate good communication skills with patients and families, and present organized verbal and written summaries of the history, physical, and management plans. Students will also be able to rotate through the specialty clinics listed above and observe pediatric cardiology, lactations, and autism consultations. Travel to different locations will be required if the student chooses to rotate through the different specialty clinics.

CS 320.90 Neurology Intensive Care Unit (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective allows medical students to learn about and manage critically ill adults in the neuro intensive care unit. Students will learn about multidisciplinary, psychosocial, ethical, moral, and legal dimensions of neuro critical care. The student will be responsible for initial primary workups and evaluations and continued management of ICU patients under Pulmonary and Critical Care Medicine fellow physician and critical care attending supervision. Students will develop skills management of stroke, seizure, intracranial hemorrhage, subdural hematoma, subarachnoid hemorrhage, post-operative neuro interventional radiology patients.

CS 321.01 Developmental and Behavioral Pediatrics (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: Baldwin Park Medical Center

During this elective, medical students will have an opportunity to dive deeper into child development and care for children with special health care needs. Medical students should expect to strengthen their history taking and surveillance skills in pediatrics. They will spend time within the ambulatory Developmental-Behavioral Pediatrics Clinic throughout the week where they will be able to participate in both multidisciplinary and interdisciplinary clinics working alongside providers from different disciplines. Medical students will evaluate and provide follow-up care for children with neurodevelopmental disabilities, learning challenges, anxiety, cognitive deficits, genetic conditions, and a variety of pediatric behavioral challenges. Medical students will gain mastery within the realm of basic child development, surveillance, and screening. Medical students should expect to see patients with diagnosis such as, but not limited to, Autism, ADHD, Intellectual Disability, Global Developmental Delay, Sensory Processing Disorder, Speech Delay, Cerebral Palsy, Trisomies, and Learning Disabilities. Medical students will also engage with members of the Neonatal Intensive Care Unit as they follow patients who graduate into our High Risk Infant Follow-Up Clinic. Faculty include members of the department of pediatrics, specifically the subspecialty of Developmental-Behavioral Pediatrics. They will work closely with providers from a variety of disciplines such as, but not limited to, Nurse Case Managers, General Pediatricians, Psychologists, Speech Pathologists, Occupational Therapists, and Social Workers. There will be no call or weekend and no residents. Journal Club Presentation due at end of elective.

CS 321.02 Critical Care Night Float: Medical Intensive Care Unit (ICU) (2.0 credit hours) Grading Scale: P/F, Location: Los Angeles Medical Center

This elective allows medical students to learn about and manage critically ill adults in the medical intensive care unit, rotating two weeks in a medical intensive care unit. Many of these patients may have multiorgan system dysfunction and/or underlying cardiac disease. Medical students will learn about multi-disciplinary, psychosocial, ethical, moral, and legal dimensions of critical care. The student will be responsible for initial primary work-ups, evaluations, and continued management of ICU patients under Internal Medicine (IM) or Family Medicine (FM) senior resident and attending intensivist supervision. The student will be part of the Night ICU team, consisting of a critical care attending and IM or FM senior resident. Medical students will develop skills in ventilator management and weaning protocols, interpret tests such as ABGs, EKGs, and CXR, and learn effective communication skills with patients and families.

CS 321.04 Family Medicine, Woodland Hills (4.0 credit hours) Grading Scale: P/F, Location: Woodland Hills Medical Center

Medical students with a career interest in Family Medicine will complete a two-week rotation at the Family Medicine clinic at KP Woodland Hills Medical Center. During the rotation, they will work with faculty and residents in our Family Medicine clinic, seeing patients of all ages. Medical students may also participate in our Family Medicine dermatology, prenatal, sports medicine, procedure, and behavior science clinics. During this rotation, medical students will experience a wide range of procedures. Medical students will also spend at least one half-day with our Community Medicine Fellow at the Simi Free Clinic.

CS 321.05 ¡KPasa! Frontera (4.0 credit hours) Grading Scale: P/F, Location: Lestonnac Free Clinic/Refugee Health Alliance (Tijuana, Mexico)

Do you suffer from "adult-onset Spanish"? Are you ready to take your Spanish to the next level and practice medicine across the border at same time? Join Dr. Tan, Dr. Meraz and Dr. Mendez as we

take you through the steps necessary to achieve communicative competence with your Spanish speaking patients.

This intensive 4-week medical Spanish elective combines weekday didactic medical Spanish with volunteering at immigrant shelters in Tijuana, Mexico. The medical Spanish class meets at KPSOM Monday thru Thursday, followed by volunteering with Refugee Health Alliance in Tijuana every Saturday.

The ¡KPasa! medical Spanish classroom component is designed for students with an intermediate level of Spanish fluency. The course director will review the required pre-course CCLA Spanish phone test prior to enrollment. At the end of the course, a repeat CCLA Spanish phone test is required but will not affect the student's grade.

Dr. Michael Tan will teach students simplified grammar and the high yield vocabulary necessary to progress through all the stages of a typical medical encounter.

Dr. Sofia Meraz will enhance students' understanding and sensitivity regarding the culture and socioeconomic factors that are important in providing appropriate health care to Spanish speaking communities.

Dr. Mitchell Mendez will oversee KPSOM faculty and students during the clinical Saturdays at Refugee Health alliance.

Dr. Michael C. Tan, a native English speaker, practices general pediatrics at KP Cudahy and has taught ¡KPasa SCPMG! medical Spanish since 2015. Dr. Sofia Meraz, a native Spanish speaker, practices Family Medicine and Obstetrics at KP Santa Ana and is the site director of the Lestonnac Free Clinic. Dr. Mitch Mendez, a native Spanish speaker, practices Family Medicine at KP Bonito in San Diego. He serves as the San Diego Language concordance champion and has a passion for advancing culturally responsive care at KP.

CS 321.05 Maternal-Child Health (2.0 credit hours) Grading Scale: P/F, Location: Baldwin Park Medical Center

Upon completion of this rotation, medical students would be able to (based on specific preferences): describe peripartum health services including follow up for infant and mother; utilize lactation services; understand peripartum mental health issues and how to leverage mental health services for patients; integrate antenatal and genetics care; understand the role of medical social work; describe the components of the newborn infant exam and the use of High-Risk Infant Follow-Up programs when needed; and understand the role of midwives and doulas. This rotation will complement learning in the OB, Family Medicine, and Pediatric clerkships by focusing on a particular period in the antenatal, birth process, the postpartum period, and newborn.

KPSOM-Affiliated Clinical Science Electives

CS 330.01 Anesthesiology (4.0 credit hours)

Grading Scale: P/F, Location: Cedars-Sinai Medical Center

This course is an elective designed to introduce the basic concepts of the practice of Anesthesiology. Students are expected to perform at an intern level under the supervision of a resident and/or faculty. Students will learn the basics of preoperative evaluations of surgical patients, intraoperative management, monitoring and fluid replacement, and postoperative care. Students will also learn about basic airway management and invasive line placement. Students will also be introduced to basic pharmacological principles of commonly used anesthetic drugs and inhalation agents. Students

will be introduced to regional anesthesia, pediatric anesthesia, OB anesthesia, and acute and chronic pain management. Most teaching will be patient care in the clinical setting, supplemented by faculty lectures and workshop/simulation sessions.

CS 330.03 Clinical Informatics (4.0 credit hours) Grading Scale: P/F, Location: Cedars-Sinai Medical Center

Clinical informatics is a subspecialty of medicine that supports health care by analyzing, designing, implementing, and evaluating information and communication systems to improve patient care, enhance access to care, advance individual and population health outcomes, and strengthen the clinician-patient relationship. During this rotation, students will learn 1) electronic health record adoption and usage, 2) electronic health record user inpatient generated data, 3) clinical decision support, 4) how information systems and processes enhance or compromise the decision-making and actions of the healthcare team members, 5) workflow analysis, 6) strategies to support clinician users and promote clinician adoption of systems, 7) how to utilize informatics tools and principles and application to optimize the provision of healthcare, 8) exposure to research informatics, and 9) exposure to informatics governance.

CS 330.06 Women's Heart Center (4.0 credit hours) Grading Scale: P/F, Location: Cedars-Sinai Medical Center

Daily activities include twice/week all-day clinic, once/week diagnostic invasive and noninvasive testing, and weekly and daily research team activities and meetings.

CS 330.07 Orthopedic Adult Reconstruction (4.0 credit hours) Grading Scale: P/F, Location: Cedars-Sinai Medical Center

This elective is intended to provide medical students with in-depth knowledge of the diagnosis and initial management of chronic musculoskeletal problems. This experience covers a spectrum of conditions, from simple arthritis to complex deformities. Medical students are expected to function at the level of an orthopedic PGY-2 and be present for the first evaluation and management of patients in the outpatient clinic and consultation in hospital wards. Daily follow-ups of these patients' progress and attending orthopedic procedures are expected. In addition to attending all weekly didactic orthopedic activities, the student will present cases at the weekly arthroplasty clinical rounds and attend the monthly orthopedic journal club.

Common Problems/Diseases

- Knee arthritis
- Knee internal derangement
- Shoulder instability
- Hip arthritis

CS 330.08 Orthopedic Trauma (4.0 credit hours)

Grading Scale: P/F, Location: Cedars-Sinai Medical Center

This elective is intended to provide medical students with in-depth knowledge of the diagnosis and initial management of musculoskeletal injuries. This experience covers a spectrum of conditions, from simple ankle sprains to complex pelvic fractures. Medical students are expected to function at the level of an orthopedic PGY-2 and be present for the first evaluation and management of patients in the emergency room, outpatient clinic, and hospital wards. A daily follow-up of patient progress and attendance to orthopedic procedures is expected. In addition to attending all weekly didactic orthopedic activities, medical students will present cases at the weekly orthopedic trauma clinical rounds and attend the monthly orthopedic journal club.

Common Problems/Diseases

- Hip fractures
- Ankle/foot sprains
- Tibia/femur fractures
- Knee injuries

CS 340.01 Endocrinology, Diabetes, and Metabolism (4.0 credit hours) Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

This four-week elective will provide clinical exposure to managing patients with diabetes and endocrinology disorders. Medical students will have the option of selecting interesting cases based on their specific interests.

In addition to participation in various clinical activities, medical students will also participate in a series of interactive learner-centered lectures. Medical students can join Didactic Lectures, Cytology Reviews, Surgical Pathology Reviews, Nuclear Medicine reviews, Clinical conferences, Case Reviews, Journal Clubs, Tumor Boards, and monthly staff meetings.

Medical Students do not receive admitting or clinical privileges; they cannot manage patients or write orders independently; they function only under the direct supervision of a City of Hope medical staff member.

CS 340.02 Interventional Radiology/Oncology (4.0 credit hours) Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

This four-week interventional radiology elective will introduce medical students to interventional oncology and how it is performed at a cancer center. Much of this elective will involve direct patient care under the supervision of a board-certified Interventional Radiologist. Medical students will be exposed to various patients, disease states, and procedures performed in this setting. Medical students will observe and participate in a wide array of image-guided interventions. Medical students will also learn the differences between the imaging modalities used for these procedures and acquire basic skills in performing these procedures.

In addition to direct patient care activities, medical students will participate in interactive learner-centered lectures focusing on how interventional radiology fits into the multidisciplinary approach to cancer care. Medical students will learn these patients' pre- and post-procedure management and how to determine if a particular patient is a candidate for image-guided intervention. Medical students will also be able to participate in the Morbidity and Mortality Conference, Grand Rounds, Tumor Boards, and IR case reviews.

CS 340.03 Neurology (4.0 credit hours)

Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

This four-week neurology elective will introduce medical students to inpatient and outpatient clinical settings and provide exposure to the neurological management of cancer and diabetic patients. Medical students will be exposed to various neurological conditions in this unique set of patients, such as neuropathy, encephalopathy, epilepsy, headaches/migraines, and brain cancer. In addition to direct patient care activities, medical students can observe electrodiagnostic studies in the neurophysiology lab, such as nerve conduction, electromyography, and electroencephalography. Medical students will also be able to participate in the Friday morning Neurotumor boards and Tuesday Grand Rounds.

CS 340.04 Psychiatry (4.0 credit hours)

Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

This four-week psychiatric elective will introduce medical students to the daily clinical practice of consultation and liaison psychiatry in a cancer setting. Medical students will work closely with an attending physician to evaluate and manage patients in inpatient and outpatient settings. Medical students will participate in regular multidisciplinary rounds involving social work and nursing. They will be able to learn about the most common psychiatric issues in medically ill patients, such as depression, anxiety, delirium, capacity, and substance use disorders. If interested, medical students can rotate for part of their time with our Palliative Care/ Interventional Pain Service.

CS 340.05 Surgery/Gynecologic Oncology (4.0 credit hours) Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

This four-week gynecologic oncology elective will expose medical students to the comprehensive care of women with gynecologic cancers. Medical student education will occur in the operating room, clinics, and the surgical ward. Medical students will be expected to see patients in the clinic, present a history and physical, and a diagnosis plan to the fellow and staff. Medical students will be expected to participate in the operative intervention of the patient. They will follow the patient in the hospital until discharged. Medical students will participate in weekly multidisciplinary Tumor Boards, Morbidity and Mortality Conferences, and Grand Rounds. Medical Students do not receive admitting or clinical privileges; they cannot manage patients or write orders independently; they function only under the direct supervision of a City of Hope medical staff member.

CS 340.06 Surgery/Neurosurgery (4.0 credit hours) Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

The four-week neurosurgery elective aims to educate medical students on the operative and pre-and post-operative management of neurosurgical conditions, especially those of an oncologic nature. Medical students will be exposed to care in inpatient and outpatient settings. Those interested in advanced cranial and spinal operations are particularly encouraged to apply. Basic surgical aptitude (i.e., tying knots) will significantly enrich the experience.

CS 340.07 Surgery/Surgical Oncology (4.0 credit hours) Grading Scale: P/F, Location(s): City of Hope (Duarte – Main Campus)

This four-week surgical oncology elective will introduce medical students to the pre-operative work-up of malignancy, the operative interventions of these malignancies, and the patient's post-operative care. Medical students can rotate on one of the four primary surgical services – breast, HPB, mixed tumor, and colorectal.

Medical students will be exposed to the surgical treatment of gastrointestinal, liver, pancreas, biliary, endocrine, and breast cancer.

Medical student education will occur in the operating room, clinics, and the surgical ward. Medical students will be expected to see patients in the clinic, present a history and physical, and a diagnosis plan to the fellow and staff. The medical student will be expected to participate in the operative intervention of the patient and will follow the patient in the hospital until discharged.

Medical students will participate in the pre-operative conferences held on Mondays. Decisions regarding the treatment plan for each operative case in the following week will be discussed among the attending and fellows. They will also participate in weekly multidisciplinary Tumor Boards, Morbidity and Mortality Conferences, and Grand Rounds.

CS 350.01 Dermatology (4.0 credit hours)

Grading Scale: P/F, Location: LAC+USC Medical Center, Keck School of Medicine, Rand Shrader Clinic

An experienced dermatology resident will be assigned to tutor each student. Under the tutor's supervision, the student will evaluate assigned patients, take histories, do physicals, formulate differential diagnoses, select further studies, and propose a therapeutic program. The student will go to wherever the tutor may be assigned. Attendance at relevant lectures is mandatory, but didactic sessions designed for the residents are considered elective for the student.

CS 350.02 Emergency Medicine (4.0 credit hours) Grading Scale: P/F, Location: LAC+USC Medical Center

Under direct supervision by the staff and residents, patients are evaluated in the emergency department (major and minor medical and trauma areas). Experience is gained in the diagnosis, treatment, and disposition of many patients with undifferentiated complaints. Students must work 12 to 16 twelve-hour shifts/month, of which 50% will be night shifts. The student is also expected to participate in weekly departmental conferences (Thursday mornings), weekly medical student lectures, workshops on suturing and EM Ultrasound, and give a short presentation for those applying to EM. In addition, a 50-question multiple-choice final exam will be given during the last week of the rotation.

CS 350.03 Gastroenterology (4.0 credit hours)

Grading Scale: P/F, Location: LAC+USC Medical Center

The rotation will teach the student to obtain a history and perform a competent physical examination to diagnose common GI disorders with well-chosen investigative procedures. The student will participate as an observer in the performance of some procedures and will be given the opportunity of performing specific investigations themselves. Also, they will participate in clinical discussions with staff.

CS 350.04 Gastrointestinal Surgery (4.0 credit hours) Grading Scale: P/F, Location: Keck Medicine of USC

The clerkship will introduce medical students to the diagnosis, preoperative preparation, operative treatment, postoperative care, and follow-up of cases referred to USC University Hospital, a tertiary care facility. The patient population includes a wide range of general surgery patients, bariatric, splenic, adrenal, hernia cases, and revisional surgery. Students on this clerkship will participate in daily rounds, assist in surgery, and attend surgical conferences and outpatient care (at the USC Healthcare Consultation Center). They will present topics at the weekly divisional conference and may have the opportunity to contribute to a research project—no night call.

CS 350.05 Interventional Radiology (4.0 credit hours)

Grading Scale: P/F, Location: LAC+USC Medical Center, Norris Cancer Center, and Keck Medicine of USC

The purpose of this elective is to expose students to vascular interventional radiology. Students will participate in daily information gathering, screening, and post-procedural care. Students will also participate in attending approved cases by observing or assisting and will be expected to prepare a case discussion and relevant literature review to present to the team.

CS 350.06 Physical Medicine and Rehabilitation (4.0 credit hours) Grading Scale: P/F, Location: Keck Medicine of USC

Medical students in this four-week elective in the Acute Rehabilitation Unit (ARU) will receive in-depth exposure to the major disabling conditions encountered in an acute inpatient rehabilitation setting. They will learn about the diagnosis and comprehensive medical and rehabilitation management of complex patients with multiple co-morbidities and suffering from conditions such as stroke, spinal cord injury, Parkinson's disease, multiple sclerosis, rheumatoid arthritis, amputation, chronic pain syndrome, or other neuropathic and myopathic conditions, in addition to patients with solid organ transplants and left ventricular assist devices (LVADs). Medical students are expected to participate in daily rounds with the attending physician and nurse practitioners, participate in the physical exam and assessment of patients and learn how to establish a comprehensive care plan. Medical students will see consultations with the attending physicians and nurse practitioners and learn how to communicate PM&R-specific recommendations to referring teams and case managers. Medical students will also participate in departmental and divisional team conferences and seminars. They will learn to work with and lead a multidisciplinary team of other physicians, physical therapists, occupational therapists, speech therapists, social workers, and nurses to optimize medical conditions and improve the functionality and quality of life of our patients with complex diseases and injuries. Medical students can research and present a rehabilitation topic to the rest of the team. No call will be taken.

CS 350.07 Pulmonary Disease (4.0 credit hours) Grading Scale: P/F, Location: LAC+USC Medical Center

The pulmonary disease elective will provide advanced clinical experience in pulmonary disease and allow the student to actively participate at the internship level in delivering care to sick inpatients and outpatients. In addition, the student will consolidate their knowledge in the basic sciences pertaining to respiratory disease. The student will participate in clinical conferences (Tuesday and Thursday) and Journal Club (Wednesday).

CS 350.08 Neurosurgery (4.0 credit hours) Grading Scale: P/F, Location: LAC+USC Medical Center

This elective is designed for the fourth-year student who has already decided to become a neurosurgeon and considers the elective time as preparation for a career in neurosurgery. This elective's objectives are tailored to complement their future career goals; for example, they may be assigned to a clinical service at LAC+USC Medical Center or another affiliated institution. If they are desirous of learning the skills essential to the success of a house officer in neurosurgery, this opportunity will be provided for them. For those students interested in laboratory exposure in neuroscience, an introductory period of effort and investigation is available in the neurosurgical laboratory.

CS 360.01, Endocrinology and Metabolism (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: UCLA David Geffen School of Medicine

Medical students will function as sub-interns in the inpatient consultation service and diabetes/endocrine clinics. The team will consist of an endocrine attending and the student, with or without an endocrine fellow. Students will also have an intensive experience with ambulatory endocrine cases. Attendance at endocrine conferences and rounds is mandatory.

CS 360.02, Gastroenterology and Hepatology (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: UCLA David Geffen School of Medicine

Third-year medical students will act as gastroenterology consultants in outpatient gastroenterology and hepatology clinics and inpatient consult services similar to medical residents; however, with

closer supervision by Fellows and Attending Physicians. About 5-10 patients a week will be assigned for complete evaluation and presentation on GI Rounds to a Senior Attending Physician. Medical students will be expected to read extensively about cases assigned and participate in all other Division of Digestive Diseases teaching activities.

CS 360.03, Nephrology Consult (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: UCLA David Geffen School of Medicine

This clinical elective is an excellent opportunity for medical students to learn about and manage renal disease in patients with frequent multisystem dysfunction. Medical students are given responsibility under the supervision of faculty, fellows, and residents. Medical students are also expected to participate in chronic dialysis and transplantation meetings when this applies to their patients. Active participation is stressed continually. The formal teaching sessions include Renal Radiology, Renal Pathology, and Renal Grand Rounds. The fellows will have prepared a discussion of a specific area of renal pathophysiology or physiology, before which all students are urged to read some pertinent material. The elective will teach medical students how to approach a broad spectrum of acid-base disorders; how to manage, diagnose, and treat various causes of hypertension; how to manage, diagnose, and treat glomerulonephritis; how to manage, diagnose, and treat acute renal failure; chronic kidney disease; various divalent cation metabolism disorders; how to manage, diagnose, and treat the dysnatremias. Specific times will be assigned for medical students to see chronic dialysis patients and fresh kidney transplant patients.

CS 360.04, Ophthalmology Consult (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: UCLA David Geffen School of Medicine

This course is offered to medical students who have had previous rotations in ophthalmology. Medical students will be matched with faculty in the subspecialty of interest to them. Medical students will participate in clinic and surgery with the subspecialists. An oral presentation on a subject of interest to the student is expected. Medical students will also join in inpatient consults.

CS 360.05, Pulmonary Consult (2.0 or 4.0 credit hours) Grading Scale: P/F, Location: UCLA David Geffen School of Medicine

This rotation is a consult elective for fourth-year medical students to join the pulmonary consultative service. This general pulmonary consultation service provides clinical care to all adult services, except for patients in the medical ICU. Medical students will be introduced to advanced pulmonary disease and physiology. They will learn the basic management of pulmonary disorders and the pathophysiology of different disorders. Medical students will be exposed to basic pulmonary procedures, including bronchoscopy and thoracentesis, chest radiology, and pulmonary function testing.

CS 370.01, Pediatric Cardiology (4.0 credit hours) Grading Scale: P/F, Location: Children's Hospital Los Angeles

Medical students will participate as a member of the Pediatric Cardiology Consultation Service at LAC+USC Medical Center and attend outpatient clinics and teaching conferences. The elective will include evaluating and managing infants and children with simple and common, as well as complex and rare cardiac conditions.

CS 370.02, Pediatric Endocrinology and Metabolism (4.0 credit hours) Grading Scale: P/F, Location: Children's Hospital Los Angeles

Medical students will learn about endocrine and metabolic physiology, pathophysiology, and communication skills with patients. Upon completing this rotation, medical students will be able to: 1) Describe the basic mechanisms of normal and abnormal physiology in the broad area of

endocrinology; 2) Demonstrate skills required to evaluate pediatric patients with endocrine disorders; 3) Describe methods for diagnosis and management of patients with endocrine disorders; 4) Describe the performance, use, and interpretation of special diagnostic methods employed in the evaluation and follow-up of pediatric patients with endocrine disease; 5) Discuss appropriate use of commonly prescribed medications in pediatric patients with diabetes, short stature, thyroid disease, and other endocrine disorders; 6) Improve oral and written presentations for pediatric patients and be able to present patient data in a concise, organized way to communicate effectively with other clinicians; and 7) Gain an understanding of how families and children cope with chronic illness. This rotation involves participating in various outpatient clinics and divisional education conferences.

CS 370.03, Pediatric Gastroenterology and Nutrition (4.0 credit hours) Grading Scale: P/F, Location: Children's Hospital Los Angeles

Medical students will spend one week on each inpatient service (General GI, Intestinal Rehabilitation, Hepatology/Transplant), participating in the care of primary patients and consults, and one week in GI outpatient clinics. Each medical student is assigned a faculty mentor for the duration of the elective. Medical students will also attend a variety of outpatient teaching conferences. Each student is expected to give a 10-15 minute presentation on a case of interest or an interesting journal article.

CS 370.04, Pediatric Hematology (4.0 credit hours) Grading Scale: P/F, Location: Children's Hospital Los Angeles

This clinical elective focuses on new patient evaluations and follow-ups for pediatric patients with oncologic and hematologic disorders.

CS 390.XX – CS399.XX Away Rotations (2.0 - 4.0 credit hours) Grading Scale: P/F, Location: TBD

Clinical rotations in off-campus hospitals are approved by the Registrar and the Director of Clinical Affairs or obtained through the Visiting Student Learning Opportunities (VSLO) system.

CS 499 Residency Immersive (2.0 credit hours) Grading Scale: P/F, Location: KPSOM

This capstone course allows students to consolidate knowledge and skills throughout their undergraduate medical education training. It prepares them for internship via longitudinal, specialty-specific, immersive simulation-based activities that replicate aspects of the residency experience. This course will prepare students to provide high-quality, safe, and patient-centered health care.

Health System Sciences Selectives

Classroom-Based

HSS 300.01 How to Excel at Diagnosis and Avoid Diagnostic Error (2.5 credit hours) Grading Scale: P/F, Location: KPSOM and Affiliated Clinical Sites

Roughly 10% of diagnoses in frontline care are wrong or delayed, and more than 100,000 individuals die from a diagnostic error annually, making a diagnostic error the #1 patient safety problem in the US today. It is also a critical barrier to delivering equitable health care. These statistics suggest that medical schools could do a better job of teaching about the diagnostic process. In this course, we will dive deeper into the diagnostic process to better understand diagnosis, optimize the process, and avoid diagnostic errors. This course will focus on active learning using a flipped-classroom approach. It will be invaluable to all medical students regardless of what specialty they may eventually select.

In this course, we will have the opportunity to examine critical issues at both the "sharp" end of medicine (e.g., the psychology of cognition, cognitive and emotional bias, critical thinking) and the "blunt" end (e.g., the safety culture, communication, coordination, and the role of teamwork).

Students will learn steps they can take individually to improve their diagnostic performance and how errors may occur in radiology, pathology, and clinical laboratories. They will also learn to which highly trained specialists they may refer patients. It will prepare students to be involved in system-level efforts to improve diagnosis. Equity in diagnosis will be reviewed, emphasizing cognitive bias and systems issues that create disparities.

This course will focus on a different theme each week, with assigned readings and activities. Week 1 will provide an introduction and include two interviews, one with a patient who has experienced a diagnostic error and the second with a provider about their diagnostic error. Week 2 will focus on clinical reasoning, cognitive error, and decision-support tools. Week 3 will focus on system issues: communication, teamwork, and human factors. In the final week, we will focus on improvement strategies: How can a system measure diagnostic errors, use performance improvement tools such as root cause analysis to understand the etiologies of diagnostic error, and how to improve the diagnostic process and/or reduce diagnostic errors.

HSS 300.02 The U.S. Healthcare System: Yesterday, Today, and Tomorrow (2.5 credit hours) Grading Scale: P/F, Location: KPSOM

Health systems are striving to achieve the results that Kaiser Permanente's integrated care and coverage model delivers, but health policy and tradition have made the evolution of the broader healthcare system challenging. This course will explore key policy elements that shape the future of American healthcare— the world in which students will practice— and examine how the founding principles and current strengths and weaknesses of the U.S. healthcare system can inform future reform discussions. Students will analyze three principal elements of healthcare policy and practice, each integral to the future of healthcare in the U.S. The class will also examine select current health policy topics. Key areas of health policy to be examined include the following:

Coverage: Students will investigate public programs such as Medicaid and Medicare (including Medicare Advantage), commercial insurance, employer-based, and self-insurance in the context of proposed models for reducing the number of uninsured people, including expansion of the Affordable Care Act, with or without a "public option," Medicare-For-All, and other coverage expansion proposals.

Delivery System Structure and Payment: Students will assess a multispecialty group practice model vs. other models, the importance of physician leadership in medical practices and hospitals, the pros and cons of fee-for-service payment vs. "global payment" methodologies (both for physicians and hospitals), and the emergence of new models of delivery system structure and payment including value-based care.

Cost: Students will examine the reasons why American healthcare is more expensive than it is in other Organization for Economic Cooperation and Development (OECD) countries. They will study the consequences of high costs, including the impact on U.S. federal debt levels on future generations and the role of "social insurance" as a tool for achieving health equity within and across generations. They will examine proposed solutions, including, for example, federal price-setting (beyond Medicare and Medicaid) and the role of the health system and physician leadership in creating incentives for physicians, clinicians, and hospitals to manage healthcare costs and value.

Current Topics in Health Policy: Students will explore current topics in U.S. health policy, including the use of artificial intelligence (AI) in health care, drug pricing, health equity, public health, and more.

The course will include didactic sessions providing medical students with a basic understanding of the principal areas of health care policy and practice described above. Group discussions will augment

these sessions. At the end of the selective, each student will be asked to write a brief (2,000 to 3,000 word) paper on a health policy topic that is of concern to them.

HSS 300.03 Social Health Practice: What it Takes to Deliver Whole Person Care (2.5 credit hours) Grading Scale: P/F, Location: KPSOM, Various Los Angeles Locations, or Virtual Sessions

Propelled by the march of value-based payment systems and mounting evidence of the impact of unmet social needs on individuals' health and overall well-being, an increasing number of health systems are starting to screen patients for unmet social needs, integrate healthcare and social services into their approaches to patient-centered, whole-person care, and adopt a range of other efforts to address the social drivers of health. These developments raise important questions about health systems' appropriate role, function, and capability in addressing social needs. They also compel individual healthcare providers and the teams they work in to cultivate new competencies to address health-related social needs effectively—competencies that comprise the core of an emergent field we call "Social Health Practice."

Using the National Academy of Medicine's recent consensus report on key features of integrated health and social care systems as a starting point, this course will support students in skillfully undertaking key social health practices and activities, including the following: 1) social needs screening, 2) social needs-informed care (i.e., "contextual care"), 3) social prescribing, 4) working with social workers, CHWs, and other members of diverse interprofessional teams, and 5) advocacy and partnership to address upstream drivers of health. The course will provide didactic instruction, skill-building workshops, and standardized patient encounters to allow students to cultivate each of these competencies.

Concurrently, students will participate in clinical practica with interprofessional teams providing exemplary integrated health and social care in Kaiser Permanente and healthcare safety net settings. Students will also participate in practica with community-based social care organizations to observe what it's like to be on the receiving end of a healthcare referral for social services and to compare and contrast approaches to whole-person care in healthcare and social service settings. The course will conclude with a project, allowing students to reflect on the appropriate role of healthcare professionals and the systems they work in to address the social drivers of health and to develop recommendations to their clinical practice sites on how to adopt and adapt the National Academy of Medicine's framework for integrated health and social care.

Course faculty will include a range of social health leaders from Kaiser Permanente and other organizations. In addition to members of the KPSOM faculty, teaching faculty for this course will consist of KP Social Health leaders, front-line staff from KP's community-based partner organizations, investigators from UCSF's Social Interventions Research and Evaluation Network (SIREN) and policy-makers and thought-leaders active in this area.

HSS 300.04 Using Lean and Systems Engineering to Improve Healthcare Delivery Operations (2.5 credit hours) Grading Scale: P/F Location: Online and one all-day in-person simulation at KPSOM

This elective will teach medical students highly practical knowledge on initiating, managing, and participating in projects improving complex care processes into well-integrated, efficient, effective, and safe workflows. It will exploit powerful tools from Lean and Systems Engineering methodologies adapted to healthcare settings. All healthcare environments—clinics, hospitals, emergency departments, operating rooms, clinical and imaging labs, pharmacies, and population care—benefit from lean and systems engineering knowledge. Lean is a management approach designed to

improve processes by eliminating wasted time and resources, smoothing and standardizing workflows, and empowering employee teams. Lean has been spectacularly successful in many applications and is now a common paradigm in all healthcare environments.

Systems engineering is a logically rigorous process that is now well-proven in healthcare and powerful in its ability to integrate fragmented care elements; it is used as a historical term and does not require knowledge of engineering or mathematics.

Part I -- Lean Healthcare (45 hours of class time): Beginning with a review of basic lean concepts and tools (understanding value, identifying and eliminating waste, workplace organization, kitting, and error-proofing), the class will advance to complex tools (process mapping, standardizing and balancing work, safety, and quality tools, empowering teams). We will address the challenges in applying lean methodologies to healthcare, such as variation and cultural issues, and the modifications required to make an effective healthcare environment. Finally, we will cover implementation and sustainment. The elective will mix traditional lecture-based instruction with active learning exercises, including a day-long clinic simulation that allows students to improve the operations of a clinic serving Lego® patients.

Part II -- Lean Healthcare Systems Engineering Process for Clinical Environments (20 hours of class time): We will focus on a logically rigorous (but non-mathematical and non-engineering) step-by-step process for executing healthcare projects ideal for integrating fragmented healthcare elements into a continuum of quality care. The process includes analysis of the current state (rigorous identification of imperfections and broken interactions between stakeholders and a well-informed problem statement), along with the design of a future state (goals, requirements, analysis of alternative solution candidates, solution architecting, risk management; verification & validation; ethics). These steps make healthcare projects robust, rigorous and eliminate wasteful iterations.

HSS 300.05 Community Engagement and Leadership in Medicine (2.5 credit hours) Grading Scale: P/F, Location: KPSOM

Leadership competencies in collaborative health promotion environments will be increasingly necessary for healthcare leaders, given the growing emphasis on coordinated care, the transformation of systems, and policy development to advance equity and improved health outcomes. Leaders must be able to work with the health system and external community members and organizations. Skilled physicians are increasingly called upon to become community-engaged leaders who utilize meaningful community engagement strategies to improve clinical and community health. Meaningful community engagement is a dynamic discipline that involves working collaboratively with others sharing similar situations, concerns, and challenges by building trusting relationships to deliberate, discuss, make decisions, and implement projects and programs. Such skills are critical for any leader in the healthcare industry, regardless of the stakeholders or situation.

Students taking this course will understand how to be physician leaders in applying principles of community engagement in clinical and community settings. This course is grounded in system thinking, social accountability, and leadership theory. It requires students to work in teams to address a health priority identified by a community organization or agency. Focused on the lay community, students will walk away with specific tools to effectively engage community members in designing priority-driven plans and programs during in-class, workshop-type sessions. Students will identify the types of stakeholder sectors necessary to engage in program or project design and, using a crossteam feedback approach, subsequently design an engagement plan and implementation strategy that will be presented to a community organization or agency for final feedback and potential adoption.

HSS 300.06 First Do No Harm: Physician Leadership in Safety (2.5 credit hours) Grading Scale: P/F, Location: KPSOM and Virtual Sessions

Attributed to Hippocrates, the phrase "first, do no harm" indicates that people have known for many centuries that they can be harmed through medical care. Patient safety has been defined as "avoiding harm to patients from care that is intended to help them." Through the late 20th and early 21st centuries, many in health care have worked diligently to reduce the risk of such harm. Tomorrow's physicians must become safety champions and leaders wherever they work.

In this course, students will learn and practice the skills needed to provide effective physician leadership in safety. Half of the course will involve studying content from the Certified Professional in Patient Safety™ (CPPS) program of the Institute for Healthcare Improvement (IHI). Content areas for this include Culture, Leadership, Patient Safety Risks & Solutions, Measuring & Improving Performance, and Systems Thinking & Design/Human Factors. The other half of the course will involve experiential and case-based learning on the approach to and application of a Safety Management System (SMS). Founded on safety science and focusing on systems improvement, an SMS is designed to achieve accountability, reliability, and resilience for both individuals and organizations. This course will center on the physician's role as a safety leader in creating a safe and just culture.

During this course, students will work directly with Kaiser Permanente physician safety leaders with national, regional, and local responsibilities as they drive towards a vision of no patient or workplace harm. The course will culminate with the opportunity to demonstrate proficiency in physician leadership through the analysis of and improvement planning for a simulated case based on current care delivery safety challenges. Through the IHI's CPPS program content, students will also be prepared for and required to take the CPPS exam. If the CPPS exam is completed successfully, a student will earn CPPS certification. (Passing the CPPS exam is NOT a requirement to achieve a passing grade for the course.)

HSS 300.07 Population Health Management: How to Achieve the Triple Aim in a Health System or Practice (2.5 credit hours) Grading Scale: P/F, Location: KPSOM

Physicians traditionally train to take care of patients as they see them. But what about the patients that do not seek medical care? What happens to the patients who do seek care in between visits? How does one prevent the fragmentation of care and health disparities? Can one measure the value of managing a population and who should be interested in the value? In this course, students will learn how individual physicians and health systems can better manage populations of patients to optimize their overall health. This course is applicable to all specialties in which one might practice and consists of directed readings with small group discussions. In addition, there will be site visits to meet with care various interested parties in population care management and an individual student project to complete. The course would cover how to define a population and the infrastructure needed to manage it. Subsequently, it will teach how to improve preventive health care (e.g., vaccinations, cancer screenings, lifestyle changes and chronic disease management (for both common and rare diseases) at a population/practice level. Other topics covered include resource stewardship, presenteeism, value demonstration, and the potential of Al and big data. Students must complete course readings, participate in class discussions, and create a proposal to manage a population of patients in a real or hypothetical practice setting of their choice.

HSS 300.08 An Integrated Sciences Approach to Cancer Screening Research: From Molecular Insights to Clinical Trials to Population Health (2.5 credit hours) Grading Scale: P/F, Location: KPSOM (virtual or in-person)

In this course, students will complete selected readings and attend didactic sessions that explore relevant aspects of cancer biology, review essential principles of cancer screening, describe important characteristics of clinical trials of screening interventions, and consider the implications of implementing existing and future cancer screening modalities for population health. One unifying theme that we will wrestle with is the "sequential progression hypothesis," or the idea that many cancers progress in a predictable and orderly fashion that allows for early identification and more effective treatment. Group discussions will explore important threats to this hypothesis from recent developments in cancer biology, other required conditions for effective screening, and underappreciated but critically important biases that are unique to clinical trials of screening interventions. Students will also grapple with key tradeoffs between effectiveness, efficiency and equity when identifying a target population for screening. Similarities and differences across organ types will be highlighted. Medical students will attend didactic sessions and one-on-one sessions with their preceptor, participate in scheduled research seminars, and complete a small-scale project that makes a potential contribution to the cancer screening literature.

The project will be co-developed by the student and the preceptor and will include a deliverable such as a review article or perspective. For example, students in a previous class prepared content material for the National Cancer Institute's Physician Data Query (PDQ) that included summaries of smoking cessation interventions and the use of aspirin for colorectal cancer prevention. More recently, students prepared a perspective-style article describing the importance of reporting harms associated with the use of new multicancer detection tests. The overarching goal is to provide an immersive experience that enables the student to understand and appreciate the perspectives of both screening advocates and detractors, and to apply fundamental principles of cancer screening in their future research or practice.

Practicums

HSS 350.01 KP Northern California Division of Research: Diabetes Care and Research in a Learning Health System (2.5 credit hours)

Grading Scale: P/F, Location: KP Northern California Division of Research (Virtual)

Medical students will participate in a summer session learning about the American Diabetes

Association standards of medical care for patients living with diabetes and methods for diabetes
research within a learning health system. Methods will include approaches to delivery science,
pragmatic clinical trial design, and stakeholder engagement. Medical students will work as part of a
Kaiser Permanente Northern California Division of Research scientific mentor's research team during
the placement and complete a small-scale research project that includes a literature review, evidence
summary, and presentation of results.

HSS 350.03 KP SCAL Resource Stewardship: Appropriate Utilization (2.5 credit hours) Grading Scale: P/F, Location: KP Regional Offices and Panorama City Medical Center, Regional Reference Laboratories (Chino Hills and North Hollywood), Pharmacy Regional Headquarters (Downey), and Los Angeles Medical Center

Medicine is changing rapidly, not just the science of medicine but also the interactions between medical care systems and patients. The complexity of practice has dramatically increased. There are many treatment options; the average older patient takes four or more medications daily, and the cost of those medications continually increases. In addition, imaging modalities and utilization have significantly increased, with a noteworthy increase in the number of scans patients receive across a

lifetime. There are ever-increasing laboratory testing options for screening, diagnosing, and monitoring patients. Finally, there is more "cost-shifting," with patients paying higher percentages of the costs of these tests and treatments. So, "medical financial stress" is a major issue for many people in the United States.

It is critical to focus on how we can provide both comprehensive and affordable care for our patients. This rotation will focus on evaluating specific condition(s) and creating systems to implement affordable, quality care through the appropriate use of imaging, laboratory tests, and medications.

Medical students will spend time with regional physicians and pharmacy leaders to learn about appropriate imaging, laboratory, and medication utilization. These leaders are responsible for implementing screening, diagnosis, monitoring, and treatment plans at the KPSC regional level. Medical students will also spend time at a local medical center with the pharmacist responsible for implementing appropriate medication utilization projects. Medical students will see how quality/utilization proposals are initiated, implemented, and tracked at the regional and local levels. Students will select an individual quality project, create practice recommendations and implementation plans, and then, if time allows, review data to gauge effectiveness. Recent KPCS appropriate utilization projects have addressed screening and treatments for dementia, screening and treatments for COVID-19, and safe and effective treatments for chronic pain management.

HSS 350.06 SCPMG Evidence-Based Medicine Services: New Medical Technology Assessment (2.5 credit hours) Grading Scale: P/F, Location: Virtual, with some on-site meetings at KP Walnut Center (Pasadena)

SCPMG's Evidence-Based Medicine (EBM) Services Unit supports KP Southern California's clinical and operational leaders in making evidence-based decisions to improve the quality, effectiveness, safety, timeliness, and efficiency of clinical care provided to our members. The EBM Services Unit systematically reviews and critically appraises scientific evidence supporting KPSC's organizational initiatives, including clinical practice guidelines, medical technology assessment, and health system implementation programs.

In this placement, the student will receive high-level training on the research methods, statistics, and critical appraisal skills involved in the evidence-based evaluation of the medical literature related to new medical technologies and other clinical interventions. Students will also receive comprehensive, practical instruction on formulating a targeted clinical question, conducting an extensive literature search, screening and selecting relevant studies, and critically appraising and summarizing a body of literature. As part of this training, the student will be assigned to complete an evidence review for a specific new medical technology.

During this placement, students will also meet with several KPSC EBM Services staff to learn about the methods and processes involved in clinical practice guideline development, new medical technology assessment, and identification and implementation of clinical practices with a strong evidence base. Students will attend meetings of the KPSC Medical Technology Assessment Team (MTAT), KP Interregional New Technologies Committee (INTC), KPSC Evidence Scanning for Clinical, Operational and Practice Efficiencies (E-SCOPE), and the KP National Guideline Committee and Guideline Quality Committee, depending on their regular meeting schedules.

HSS 350.07 SCPMG Health Innovations Department: Health Innovation Solutions (2.5 credit hours) Grading Scale: P/F, Location: Virtual or In-Person at the Innovation Design Studio (Tustin)

The Southern California Permanente Medical Group (SCPMG) Health Innovation Department is on a mission to envision and build the healthcare delivery system of the future. This team of physicians, consultants, data scientists, and designers partner with organizational and industry experts to create care systems that leverage technologies, clinical expertise, and human-centered design.

This placement will provide an immersive experience across various areas of innovation in KP's healthcare system, specifically: virtual care, design and user research, and big data and artificial intelligence. Over the course of the placement, students will learn how to play a critical role in one of the following areas: enabling and integrating virtual care solutions, leveraging artificial intelligence/machine learning, or human-centered design thinking. Core instruction will introduce students to innovation cycles from ideation and proof of concept to deployment and key strategies from industry experts. This course will encourage students to practice systems-based thinking and leverage creativity, analytics, and research to redesign and transform how care is delivered at Kaiser Permanente.

HSS 350.09 Los Angeles County Department of Public Health: Chronic Disease Branch (2.5 credit hours) Grading Scale: P/F, Location: Virtual and On-Site (TBD)

The primary mission of the Division of Chronic Disease and Injury Prevention of the Los Angeles County Department of Public Health is to help make Los Angeles County a healthier place. In collaboration with community partners and key stakeholders, the Division focuses on reducing the risk and burden of chronic disease, injury, and social conditions that affect health to promote well-being and quality of life for all residents in this diverse county. Good health provides the foundation for a strong quality of life for our children, families, and friends. Everyone benefits when we focus on prevention and make our communities places of health, safety, and opportunity for social and economic growth.

In this placement, students will work with Division staff on programs that aim to change policies, systems, and environments through collaboration with one or more community-based organization partners. Potential examples of student involvement may include support or involvement with:

- Fieldwork conducting opinion surveys in communities working on tobacco smoke-free policies
- Design of nutritional evaluation process of food served in county detention facilities
- Prepare and deliver presentations to community stakeholders on tree planting strategies to improve physical and mental health and address extreme heat
- Utilizing social media to increase physical activity across the lifespan
- Increase access to social needs and wellness programs and evaluation of these programs

Note: Because of engagement with community stakeholders, these activities may need to be conducted outside of traditional office hours, including weekends. Division staff will work with students to determine appropriate project deliverables for stakeholders.

HSS 350.10 Los Angeles County Department of Public Health: Social Epidemiology Team (2.5 credit hours) Grading Scale: P/F, Location: Virtual and On-Site (TBD)

The Los Angeles Department of Public Health (LADPH) has recently launched an innovative Social Epidemiology Unit within its Office of Health Assessment and Epidemiology. LAPDH's new Social

Epidemiology Unit aims to examine the underlying social, economic, and environmental drivers of inequities (social determinants of health) in individual and population health in LA County.

The Social Epidemiology Unit seeks to examine the proportional impacts of determinants such as racism and social, economic, and environmental factors such as housing, education, labor/employment, social services, income inequality, social spending/investment, and environmental conditions on inequities in population health outcomes such as life expectancy, age-adjusted mortality, quality of life, and health adjusted life years (e.g., quality-adjusted life years, disability-adjusted life years). Findings from projects conducted by the Unit will inform operational, partnership, resource allocation, and policy development decision-making.

In this placement, students will gain insight into developing and implementing a new public health program. Working with Social Epi unit staff, students may assist with the following:

- Writing reports and white papers that summarize the findings and positions the program will be
 proposing to departmental leadership for utilizing a social determinants framework to guide
 activities department-wide and in community settings
- Performing systematic literature reviews in this field to identify gaps in knowledge and identify additional analyses needed at the county level to inform, guide, and advance departmental work
- Evaluating local and national health outcome-focused studies and reports using a social epidemiology lens of acknowledging, at a minimum, underlying drivers of health inequities
- Interpretation, communication, and dissemination of findings from social epidemiological studies conducted by the team
- Shadowing program physician leadership to become familiar with the physician role in a local public health department

Note: Because of engagement with community stakeholders, these activities may need to be conducted outside of traditional office hours, including weekends. Division staff will work with students to determine appropriate project deliverables for stakeholders.

HSS 350.11 Reproductive Heatlh Equity at Planned Parenthood of San Gabriel Valley (2.5 credit hours) Grading Scale: P/F, Location: Virtual and On-Site

The four-week selective at Planned Parenthood Pasadena and San Gabriel Valley (PPPSGV) will introduce medical students to reproductive justice through the lens of advocacy, health systems, and clinical practice. Medical students will join a dynamic team of "essential health care providers and trusted educators who center [their] work on sexual and reproductive care and advocate for all people to live authentic and healthy lives." This selective will be a unique experience to explore the foundations of advocacy skills at the health system, policy, and legislative levels with one of the oldest Planned Parenthood affiliates in the nation.

HSS 350.13.XX Student Initiated Experience (2.5 credit hours) Grading Scale: P/F, Location: TBD

Student Initiated Experiences (SIEs) are custom-designed placements allowing students to explore interest areas. Akin to independent study, SIEs may serve as extensions of scholarly projects, Service-Learning practicum, or LIC projects. In such cases, students must demonstrate that the SIE represents a significant incremental effort and learning above and beyond the requirements of those projects.

Students are responsible for developing a course proposal, including learning objectives, an assessment plan, and a description of how the course maps to one or more of the universal Phase 3 Educational Program Outcomes (EPOs). Students wishing to pursue an SIE would also be required to enlist an HSS faculty member who would help the student develop the proposal and serve as the course sponsor.

HSS 350.14 KP Institute for Health Policy – Health Policy and Advocacy in Healthcare Systems (2.5 credit hours) Grading Scale: P/F, Location: TBD

The Kaiser Permanente Institute for Health Policy (IHP) shapes policy and practice by leveraging the experience and evidence of the nation's largest private integrated delivery and financing system, and by bringing together experts from inside and outside the organization to address some of the nation's most pressing health policy issues. In this placement, students will work with IHP staff and KP government relations leaders to develop, analyze, and disseminate information on health policy ideas that have the potential to improve the value of healthcare in the United States. KP leaders identify policy priorities based on their salience and the opportunity for KP's voice on these issues to influence policy outcomes. Recent policy issues addressed by the Institute include mental health, drug pricing, Medicaid policy, and value-based care. For this placement, students will work with IHP staff to advance the Institute's work on an issue that is a priority for the institute. Effort will be made to align with student interests as well. Students are required to work independently and produce deliverables in a timely manner. Projects deliverables may include contributing to an article, drafting a policy brief for one of KP's Health Policy Councils, and/or supporting convenings with key stakeholders to help frame and bring focus to a health policy issue.

HSS 350.15 KP Social Health Practice: Accelerating Food as Medicine (2.5 credit hours) Grading Scale: P/F, Location: TBD

Lack of good nutrition is the number one driver of poor health outcomes in the U.S. Poor diets are the leading cause of death, with Americans with lower incomes, living in rural communities, and from historically marginalized racial and ethnic groups most affected. Food insecurity is directly correlated with poor health, including higher rates of diabetes, hypertension, and heart disease. When people are hungry or cannot access nutritious food, they are less likely to get or stay healthy. The wideranging chronic health issues driven by hunger are estimated to increase the cost of health care by \$160 billion each year and, because of the racial inequities associated with hunger and nutrition, food insecurity is also a driver of health disparities that are so persistent in our country.

Kaiser Permanente launched its Food Is Medicine (FIM) Center of Excellence (CoE) in the Spring of 2024 to integrate food and nutrition interventions more fully into our care model and transform how we treat and prevent diet-related diseases and hunger. The FIM CoE will serve as a central resource within the organization for delivering the highest standard of Food Is Medicine programs for our members. It will support our care and service teams with information, programs, and tools for using nutritious food to treat and prevent diet-related diseases. It will also help patients with lower incomes access and afford healthy food.

In this placement, students will work with members of the KP FIM CoE team to support the integration of evidence-based food-based nutritional interventions into care delivery to treat or prevent disease, reduce hunger, and advance health equity. Students will deepen their understanding of Food Is Medicine and work with the KP FIM CoE team to develop novel and scalable approaches for providing FIM programs to members. The placement will focus on supporting critical priorities on KP's FIM Center of Excellence roadmap that advance the overarching strategy to move toward the future state vision that nobody goes to bed hungry – and all people – regardless of where they live and their economic status – have the resources and support they need to become and stay healthy.

HSS 350.16 Housing for Health: Los Angeles Chief Executive Office Grading Scale: P/F, Location: TBD

Housing and health are inextricably linked. Without a safe place to call home, it's nearly impossible for our patients to focus on their basic health and medical needs. Working to solve homelessness is not only a health issue but also a health equity and racial justice issue. This understanding is integral to Kaiser Permanente's commitment to equity by improving social conditions for vulnerable populations and closing disparity gaps, particularly among communities of color. Further, we cannot solve the affordable housing and homelessness crisis alone. We can move the needle for our most vulnerable communities through innovative partnerships, strategic investments, and impactful storytelling.

One of our key Los Angeles-based partners in our work on housing and homelessness is Los Angeles County's Homeless Initiative. Housed within the L.A. County Office of the Chief Executive Officer, this unit is responsible for coordinating the activities of all county agencies involved in responding to and preventing homelessness and coordinating with other jurisdictions, including the City of Los Angeles and the Los Angeles Homeless Services Authority to develop a whole of government approach.

Students working in this placement will gain a systems-level understanding of housing and homelessness and have a unique opportunity to work with an organization at the forefront of addressing one of our country's most urgent and solvable crises. Placement projects may include participation in developing and implementing community-based health, social, and housing programs for people experiencing homelessness and with complex health and behavioral health conditions.

HSS 350.17 SCPMG Systems, Solutions, and Deployment (SSD) - Clinical Informatics Grading Scale: P/F, Location: KPSOM/Virtual

This Clinical Informatics (CI) Selective provides third- and fourth-year medical students with a foundation in clinical informatics, emphasizing how technology enhances healthcare delivery, decision-making, and patient outcomes. Through didactics, weekly readings, and hands-on projects with clinical informaticians, students will learn about data systems, electronic health records (EHRs), health information exchange, clinical decision support, and artificial intelligence (AI). The selective covers essential informatics principles, including system interoperability, data standards, and the role of CI in improving workflow efficiency, patient safety, and personalized medicine. By the end of the course, students will understand how informatics bridges the gap between clinical practice and digital health solutions, enhancing their ability to leverage technology in healthcare.

During the four weeks, students will complete a CI capstone project tailored to a clinical specialty and informatics area of their choice. Sample projects include: (1) designing a simple clinical decision support tool for primary care that encourages the use of identifying care gaps with newly revised recommendations; (2) developing a radiology template that automates common diagnostic reports, improving workflow efficiency and reducing manual entry errors; (3) analyzing medication reconciliation workflows in cardiology to identify bottlenecks and recommend system improvements; (4) implementing a surgical procedure checklist within an EHR, aimed at reducing preoperative errors and improving patient safety. These projects provide hands-on experience solving real-world informatics challenges while deepening students' specialty-specific knowledge and practical informatics skills.

General Electives

GEN 300.01 Culinary Medicine (4.0 credit hours)

Grading Scale: P/F, Location: KPSOM/TBD Community and Clinical Sites

Wondering what your patients should eat for optimal health? The culinary medicine (CM) elective introduces medical students to this field, which combines the art of cooking with evidence-based science and nutrition to maintain and improve health. Before each session, medical students are expected to watch videos and read assigned literature on culinary techniques and nutrition to be prepared for hands-on learning. This elective is based on several practical, hands-on components, including:

- 1. Healthy Cooking Laboratory students will cook in weekly sessions and learn to prepare flavorful meals from diverse cultures using a range of predominantly whole, plant-based ingredients.
- 2. Nutrition Lectures
- 3. Health Education Internship students will have a weekly opportunity to attend classes conducted by the Center for Healthy Living at various medical centers, and shadow registered dieticians and health educators to learn about working with interprofessional collaborative teams to support health behavior change in any healthcare environment.
- 4. Health Behavior Change Techniques including motivational interviewing experiences throughout the workshop
- 5. Mindfulness/Mindful Eating Workshop

GEN 300.02 Medical Education (4.0 credit hours) Grading Scale: P/F, Location: Virtual

This four-week elective offers medical students the opportunity to study the theory and practice of medical education. The elective has two components. The first component is a series of seminars and workshops that introduce medical students to the fundamental principles of medical education, focusing on educational theory and evidence derived from medical education literature. The second component is a structured independent study model that will require medical students to develop and apply skills in one of the following areas: assessment, course administration, curriculum design, equity, inclusion and diversity, faculty development, or simulation. Medical students will be able to observe and learn from role models in medical education and explore how they can integrate their roles as clinicians and educators regardless of their career goals. Assessment will be built into the elective through self-reflection activities. Medical students will receive verbal and written feedback on their work products from peers and faculty.

GEN 300.03 Intersections of the Natural Environment and Health Outcomes (2.5 credit hours) Grading Scale: P/F, Location: KPSOM/Virtual/TBD Community Sites

This selective is a four-week experiential survey course, primarily located at KPSOM, incorporating asynchronous and field experiences, exploring the nature and impacts of the environment writ large on individual and community health through a public health lens. The course begins with a primarily didactic element to provide the foundations of environmental issues relative to health disparities. The remaining three weeks will involve engagement with local community partners working at the intersection of environment and health, focusing on impacts on community health, integration into clinical care, and how to engage in environmental health advocacy. Students will hear from local environmental justice advocacy organizations and be exposed to the social histories of local natural places. Topics may include park equity and access for health, park Rx, inequitable impacts of climate change, environmental hazards, and community resilience. Assessment may consist of weekly field reflections, creative work, and/or a position piece or white paper on a specific environmental health issue.

GEN 300.04 Foundations of Integrative Medicine (2.0 credit hours) Grading Scale: P/F, Location: KPSOM/Virtual

This selective is a two-week immersive course intended to introduce Integrative Medicine, emphasizing the integration of cross-cultural healing and well-being practices into conventional approaches to treat the whole person. We will examine the evidence for these practices and hear from providers on the barriers and benefits of integration. We will also use an equity lens to consider topics like access to care, the validity of evidence, and engaging with patients and providers with cultural humility. Students will gain an understanding of the field and develop their philosophy of integration. The course will include in-person didactic learning, practitioner panels, independent learning modules, and off-site shadowing of local practitioners. Core areas of practice students can expect to explore include but are not limited to traditional Chinese medicine, ayurvedic medicine, naturopathy, acupuncture, and osteopathy. Residency Immersive

Research and Scholarship

RS 400 Scholarly Project (6.0 credit hours) Grading Scale: P/F, Location: KPSOM

The Scholarly Project (SP) is required for graduation for all MD students, except those completing the MD/PhD program. The SP course is a longitudinal experience during Phase 3 of the curriculum (with preparatory work in Phases 1 and 2). The SP allows students to deeply explore an area of particular interest, learn skills to ask and answer a question using rigorous methods and contribute to the available evidence regarding health or health care. Project types may include quantitative or qualitative research studies, scholarly work in quality improvement or implementation science, projects using methods of inquiry from social sciences, and other approved projects. Many projects will include analysis of data previously collected for research or in the conduct of clinical care. Other projects may include prospective data collection in health care or community settings. Students will work on their projects longitudinally. In addition, a dedicated four-week block during Phase 3 has been reserved for concerted "block time" without other responsibilities so that students can make substantial progress on their projects. Specific activities during the block time will vary by project type and individual student progress before the scheduled block. Some students may have already completed (or be close to completing) their required scholarly project. Such students may request exemption from participation in either 2 or 4 weeks of the block experience. Exemption requests (submitted through the Office of Research and Scholarship) must be approved by the Scholarly Project Oversight Panel (SPOP) based on a student's progress.

Board of Directors

Further information on the Kaiser Permanente Bernard J. Tyson School of Medicine Board of Directors is located at: medschool.kp.org/about/board-of-directors

Glenn M. Hackbarth, JD, MPP, Board Chair

Former Chairman, Medicare Payment Advisory Commission; Cofounder and Former CEO, Harvard Vanguard Medical Associates; Former Chairman, Foundation of the American Board of Internal Medicine

Directors

John L. Dalrymple, MD

Dean and CEO Kaiser Permanente Bernard J. Tyson School of Medicine

Maria Ansari, MD, FACC

Chief Executive Officer and Executive Director, The Permanente Medical Group; President and CEO, Mid-Atlantic Permanente Medical Group; Co-CEO, The Permanente Federation

Ramón Baez

Board of Directors Kaiser Foundation Heath Plan and Hospitals

Andrew Bindman, MD

Executive Vice President and Chief Medical Officer, Kaiser Foundation Health Plan Inc., and Hospitals

Ronald L. Copeland, MD, FACS

Senior Vice President of National Diversity and Inclusion Strategy and Policy; Chief Equity, Inclusion, and Diversity Officer, Kaiser Foundation Health Plan and Hospitals

Ramin Davidoff, MD

Co-CEO, The Permanente Federation, LLC; Executive Medical Director and Chairman of the Board, Southern California Permanente Medical Group; Chairman of the Board and CEO, The Southeast Permanente Medical Group; Chairman and CEO, Hawaii Permanente Medical Group

Mary Hentges

Advising CFO, Noom, Inc. through KongBasile, LLC; Independent Board Member, Upstart Holdings (NASDAQ:UPST) and Akili, Inc. (NASDAQ: AKIL) and Arizona State University Foundation; Advisor, Jiko Group

Anthony Iton, MD, JD, MPH

Lecturer and Social Impact Fellow at UC Berkeley School of Public Health

Leong Koh, MD

President and CEO, Permanente Medicine, Northwest Permanente, PC

Peter Lee, PhD

President, Microsoft Research

David G. Nichols, MD, MBA, FAAP, FCCM, Board Vice Chair

Emeritus President and Chief Executive Officer, The American Board of Pediatrics; Emeritus President, The American Board of Pediatrics Foundation; Emeritus Professor of Anesthesiology/Critical Care Medicine and Pediatrics, The Johns Hopkins University School of Medicine

Marc A. Nivet, EdD, MBA

Executive Vice President for Institutional Advancement, University of Texas Southwestern Medical Center

Carol Raphael, MPA, MEd

Senior Advisor, Manatt Health

Gilbert Salinas, MPA

Assistant Director and Chief Equity Officer, Health Services for Contra Costa County

Maria S. Salinas, CPA

President and CEO, Los Angeles Chamber of Commerce

Administration

Additional information regarding the Kaiser Permanente Bernard J. Tyson School of Medicine's leadership team can be found at: medschool.kp.org/about/leadership.

John L. Dalrymple, MD

Dean and CEO

Moe Aboufares, MBA, CPA

Interim Senior Vice President and Senior Associate Dean for Administration and Finance

Anthony E. Burgos, MD, MPH

Chair of Clincial Science: Associate Professor

Lori R. Carter-Edwards, PhD, MPH

Associate Dean for Community Engagement and Government Affairs; Professor

H. Carrie Chen, MD, PhD

Associate Dean for Medical Education Research and Scholarship; Professor

Paul J. Chung, MD, MS

Chair of Health Systems Science; Professor

Anne M. Eacker, MD

Senior Associate Dean for Student Affairs; Associate Professor

Jonathan A. Finkelstein, MD, MPH

Senior Associate Dean for Research and Scholarship; Professor

Stephen Garrett, PhD

Interim Chair of Biomedical Science: Associate Professor

Deepthiman Gowda, MD, MPH, MS

Assistant Dean for Medical Education: Associate Professor

Carla Lupi, MD, FACOG

Interim Associate Dean for Medical Education; Associate Dean for Assessment and Evaluation; Professor

Quyen Ngo-Metzger, MD, MPH

Interim Associate Dean for Faculty Affairs; Professor

Ije-Enu Udeze Nwosu, MBA

Chief Advancement Officer

Lindia J. Willies-Jacobo, MD

Senior Associate Dean for Admissions and Equity, Inclusion, and Diversity; Professor

Faculty

The faculty listed below were employed as of the publication of this catalog. Faculty profiles for all current Kaiser Permanente Bernard J. Tyson School of Medicine faculty can be viewed at: medschool.kp.org/faculty/members.

Biomedical Science

Malaika W. Amneus, Member of the Faculty. MD, David Geffen School of Medicine at UCLA

Dolgor Baatar, Professor. MD, First Moscow Medical University; PhD, Oita University

José M. Barral Sanchez, Adjunct Professor. MD, Instituto Tecnologico y de Estudios Superiores de Monterrey Escuela de Medicina Ignacio A. Santos; PhD, Baylor College of Medicine

Mostafa Belghasem, Adjunct Associate Professor. MD, University of Tripoli; PhD, Boston University; MA, Boston University

Jennifer K. Chotiner, Associate Professor. PhD, University of California, Los Angeles

Stephen Garrett, Associate Professor. PhD, Johns Hopkins University

David C. Kersey, Associate Professor. PhD, George Mason University

Ka-Man (Ivy) Law, Instructor. PhD, University of Hong Kong; MPhil, University of Hong Kong

Ryan S. Lee, Adjunct Assistant Professor. PhD, Harvard University

Kirsten Ludwig, Assistant Professor. PhD, University of Virginia

Udochukwu (Udo) Obodo, Instructor. PhD, Vanderbilt University

Jordan Parker, Associate Professor. PhD, University of California, Los Angeles

Ameed Raoof, Professor. MD, University of Baghdad College of Medicine; PhD, University of Dundee; MS, University of Baghdad

Sung W. Rhee, Professor. PhD, University of Washington; MS, Seoul National University

Rosaysela (Rosie) Santos, Associate Professor. PhD, University of California, Irvine

Kaihong Su, Professor. PhD, University of Alabama at Birmingham; MS, Nankai University

Katerina Venderova, Associate Professor. PhD, Charles University; PharmD, Charles University, Faculty of Pharmacy; MPharm, Charles University

Sylvia A. Vetrone, Associate Professor. PhD, University of California, Los Angeles

Andrew M. Vosko, Associate Professor. PhD, University of California, Los Angeles

Clinical Science

Rebecca C. Aaronson, Clinical Assistant Professor. MD, University of Miami Leonard M. Miller School of Medicine

Danish Abbas, Clinical Assistant Professor. MD, St George's University, School of Medicine

Afshan R. Abbasi, Clinical Assistant Professor. MD, University of Karachi, Sindh Medical College

Rachel A. Abbott, Clinical Assistant Professor. MD, Virginia Commonwealth University School of Medicine

Antoine Abcar, Clinical Associate Professor, MD, Drexel University College of Medicine

George Abdelsayed, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Corollos Samir Abdelshehid, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Jenny A. Abouelsood, Clinical Associate Professor. MD, Ain Shams University School of Medicine

Eric R. Abrams, Clinical Assistant Professor. MD, Northeast Ohio Medical University College of Medicine

Marla Law Abrolat, Assistant Professor. MD, David Geffen School of Medicine at UCLA

Joseph R. Acevedo, Clinical Instructor. MD, University of California, San Diego School of Medicine"

Olga Acosta, Clinical Assistant Professor. MD, University of Illinois College of Medicine

Michael (Mike) Adair, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Sarah Adams, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Kateena L. Addae-Konadu, Clinical Instructor. MD, Morehouse School of Medicine; PhD, Morehouse School of Medicine; MS, Morehouse School of Medicine

Virginia A. Adewole, Clinical Instructor. MD, University of California, Davis School of Medicine

Francesca D. Adriano, Clinical Associate Professor. MD, The University of Texas at Austin Dell Medical School

Negean Afifi, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Jennifer (Jen) Aguayo, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Stevie (Steve) A. Aguilar, Clinical Instructor. MD, Rush Medical College of Rush University Medical Center

Saif Ahmed, Clinical Instructor. DO, Lincoln Memorial University - DeBusk College of Osteopathic Medicine

Sameer Ahmed, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Dean Ahn, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Zahra Ajani, Clinical Assistant Professor. MD, Amravati University

Oluyemi A. Ajirotutu, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Nima Akhavan, Clinical Assistant Professor. MD, Ross University School of Medicine

Khalil Akimi, Clinical Associate Professor. MD, Drexel University College of Medicine

Alvera A. Akroush, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Fred Alamshaw, Clinical Associate Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Mehrdad Alemozaffar, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA; MS, University of Southern California

Ali A. Ali, Member of the Faculty. MD, University of Khartoum Medical School; MAS, Arizona State University

Baber H. Ali, Clinical Instructor. MD, New York University Grossman School of Medicine

Rebecca S. Alleyne, Clinical Assistant Professor. MD, Howard University College of Medicine; MHA, University of Southern California

Anasheh Almasi, Member of the Faculty. MD, Ross University School of Medicine

Reynaldo (Rey) Alonso, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Lisa Altieri, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Florcita Alvarez-Galoosian, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Arthur Kevin C. Amador, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Hamid Reza Amanatkar, Clinical Assistant Professor. MD, Isfahan University School of Medicine

Chetan Amar, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Cristina Amaya, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Ma. Teresa C. Ambat, Clinical Assistant Professor. MD, University of Santo Tomas Faculty of Medicine and Surgery

Julie A. Ames, Clinical Assistant Professor. MD, University of Iowa Roy J. and Lucille A. Carver College of Medicine

Delores A. Amorelli, Assistant Professor. EdD, Drexel University, School of Education; MA, University of South Florida; MA, University of Florida

Lucia S. An, Clinical Instructor. MD, Rutgers New Jersey Medical School

Ajay K. Ananda, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Sowmya Ananthanarayanan, Clinical Assistant Professor. MD, Yerevan State Medical University; MPH, University of South Florida

Iden D. Andacheh, Assistant Professor. MD, Keck School of Medicine of the University of Southern California

David V. Anderson, Clinical Assistant Professor. MD, Michigan State University College of Human Medicine

Dennis A. Andrade, Clinical Associate Professor. MD, University of California, San Diego School of Medicine

Stephanie AK Angarita, Clinical Assistant Professor. MD, University of Michigan Medical School

Ifeoma Anidi, Clinical Assistant Professor. MD, University of Benin School of Medicine

Margarita M. Aponte, Clinical Assistant Professor. MD, Pontificia Universidad Javeriana

Brian Apter, Clinical Instructor. MD, Albert-Ludwigs University

Christopher B. Aquino, Clinical Assistant Professor. MD, Albany Medical College

Mariam Arabyan, Clinical Assistant Professor. MD, Ross University School of Medicine

Craig K. Arakaki, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

Deborah Arden, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai

Elizabeth Arnall, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Puneet Arora, Clinical Associate Professor. MD, B.J. Government Medical College

Vasudha N. Arora, Clinical Assistant Professor. MD, Government Medical College

Shelley Arredondo, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Hector H. Arroyo Jr., Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

James R. Arteaga, Clinical Assistant Professor. MD, McGovern Medical School at The University of Texas Health Science Center at Houston

John A. Artenos, Clinical Assistant Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Shant Ashdjian, Clinical Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science; MS, Georgetown University

Mark A. Ashley, Clinical Instructor. MD, Loma Linda University School of Medicine

Haris Ashraf, Clinical Assistant Professor. DO, Rocky Vista University College of Osteopathic Medicine

Huzaifa Ashraf, Clinical Assistant Professor. MD, Government Medical College of Srinagar Kakisarai

Kamran (Sharone) K. Askari, Clinical Assistant Professor. MD, University of Minnesota Medical School

Samer (Sam) A. Assaf, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Vidush Athyal, Clinical Associate Professor. MD, Ben-Gurion University of The Negev/Columbia University; MPH, Loma Linda University

Ani Ardashian Atoian, Member of the Faculty. MD, University of California, Irvine School of Medicine

Vikram Attaluri, Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Rajeev Attam, Clinical Professor. MD, University College of Medical Sciences

Tin T. Aung, Clinical Instructor. MD, Institute of Medicine I

José Avalos, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Gulnar Avaz, Clinical Assistant Professor. MD, University of Oklahoma College of Medicine

Mark Awad, Clinical Instructor. MD, Indiana University School of Medicine

Shaadi Azadeh, Clinical Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Kseniya Azerf, Clinical Instructor. MD, Michigan State University College of Human Medicine

Elizabeth A. Azinge, Clinical Assistant Professor. MD, University of Nigeria College of Medicine

Parisa Azizad-Pinto, Clinical Instructor. MD, University of California, Davis School of Medicine

Maysam Azizi, Clinical Assistant Professor. MD, Islamic Azad University, Tehran Faculty of Medicine

Ramzi Azzam, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California; PhD, California Institute of Technology

William B. Babbitt, Clinical Instructor. MD, University of California, San Francisco (UCSF) and Berkeley (UCB) Joint Medical Program; MS, University of California, San Francisco

Yvonne Bach, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Shirin Badrtalei-Shah, Member of the Faculty. DO, Touro University College of Osteopathic Medicine-California; MPH, Yale University

Maryam E. Bahadori, Clinical Instructor. MD, University of California, Davis School of Medicine

Thomas J. Bahk, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Nicole Bailey, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Zachary Paul Bailowitz, Clinical Assistant Professor. MD, University of Arizona College of Medicine - Tucson

Gurvijay S. Bains, Clinical Instructor. MD, St George's University, School of Medicine

Malinda Baker, Clinical Instructor. MD, Loma Linda University School of Medicine

Marwan Bakhach, Clinical Assistant Professor. MD, American University of Beirut Faculty of Medicine

Mari K. Baldwin, Clinical Assistant Professor. MD, University of Minnesota Medical School

Garo K. Balkian, Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Sumati Bansal, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Monique Barbieto, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Tina Barjasteh, Clinical Instructor. MD, Georgetown University School of Medicine

Leah Barlavi, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Adrianna Y. Barrett, Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Amanda C. Barrett, Clinical Assistant Professor. MD, University of Florida College of Medicine

Kody Barrett, Member of the Faculty. MD, Keck School of Medicine of the University of Southern California

Barsegh A. Barseghian, Clinical Instructor. MD, Virginia Commonwealth University School of Medicine

Karine Barseghyan, Clinical Assistant Professor. MD, Yerevan State Medical University

Motahar W. Basam, Clinical Assistant Professor. MD, Howard University College of Medicine

Nora Bassiouni, Clinical Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Jemianne T. Bautista, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Peter Baxter, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Ardalan (Ardy) Bazargan-Lari, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Brandon Emet Beaber, Clinical Assistant Professor. MD, Drexel University College of Medicine

Robert Beinrauh, Clinical Instructor. MD, Rush Medical College of Rush University Medical Center

Kevin O. Belgrave, Clinical Assistant Professor. MD, Howard University College of Medicine; MS, Howard University

Jeff V. Benabio, Clinical Associate Professor. MD, Wake Forest University School of Medicine; MBA, University of California, San Diego

Nicole R. Benitah, Clinical Instructor. MD, University of California, San Francisco School of Medicine

Hilary A. Bennett, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Terese S. Bergheim, Clinical Instructor. MD, Norwegian University of Science and Technology (NTNU) Faculty of Medicine

Rebecca G. Berke, Clinical Associate Professor. MD, Wake Forest University School of Medicine

Benjamin R. Berry, Clinical Assistant Professor. MD, SUNY Downstate Health Sciences University College of Medicine

Rebecca Bertin, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Jodi Berzak-Wolf, Clinical Assistant Professor. DO, Lake Erie College of Osteopathic Medicine - Erie

Simran Bhandari, Clinical Assistant Professor. MD, University of Missouri-Kansas City School of Medicine"

Ashitosh Bhansali, Clinical Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science; MS, Rosalind Franklin University of Medicine and Science

Chetan Bharel, Clinical Assistant Professor. MD, New York Medical College

Dimple Bhasin, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Alok Bhatt, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Onita Bhattasali, Assistant Professor. MD, Tulane University School of Medicine; MPH, Tulane University

Manjita Bhaumik, Clinical Instructor. MD, University of California, Irvine School of Medicine

Thomas R. Blair, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine; MS, University of California, San Francisco

Elliott S. Block, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California

Zachary Boas, Clinical Instructor. MD, Duke University School of Medicine; MPH, University of North Carolina

Madhav R. Boddula, Clinical Assistant Professor. MD, Tufts University School of Medicine; MPH, Tufts University

Steven J. Bolger, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Claire A. Bolotaulo, Clinical Instructor. MD, University of Santo Tomas Faculty of Medicine and Surgery

Daniel Bonnici, Clinical Assistant Professor. MD, Frederick P. Whiddon College of Medicine at the University of South Alabama; JD, New York University School of Law

Brock E. Booth, Clinical Instructor. DO, Des Moines University College of Osteopathic Medicine

Diwata (Dee) Hope A. Bose, Clinical Assistant Professor. MD, University of the Philippines College of Medicine

Daniel Bouland, Clinical Associate Professor. MD, Loma Linda University School of Medicine

Marina Boyarsky, Clinical Instructor. MD, Ross University School of Medicine

Harminder (Tony) Brar, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Harpreet K. Brar, Clinical Instructor. MD, Ross University School of Medicine

Somjot (Sam) Brar, Clinical Associate Professor. MD, Sackler School of Medicine / New York State-American Program Tel Aviv University; MPH, Harvard University

Sonu Brara, Clinical Instructor. MD, Drexel University College of Medicine

Sreyah Brereton, Clinical Instructor. DO, Midwestern University Arizona College of Osteopathic Medicine

Alexander (AJ) Bressler, Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Jeffrey (Jeff) W. Brettler, Associate Professor. MD, University of Chicago Division of the Biological Sciences, The Pritzker School of Medicine

Michael (Mike) B. Brewer, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Letitia T. Bridges, Clinical Assistant Professor. MD, Washington University in St. Louis School of Medicine; MBA, University of California, Los Angeles

Michelle T. Britt, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Michael Bronstein, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

David D. Broumandi, Clinical Associate Professor. MD, Emory University School of Medicine

Blake C. Brown, Clinical Assistant Professor. MD, Howard University College of Medicine

Gabrielle E. Brown, Clinical Assistant Professor. MD, University of Arizona College of Medicine - Tucson; MS, University of Arizona - Tucson

Laura E. Brown, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Uyioghosa (Uyi) Evelyn Brown, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA; MS, California State University, Los Angeles

Lance Brunner, Clinical Instructor. MD, University of California, Irvine School of Medicine

Diana Bruno, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Andrew Brunswick, Clinical Instructor. MD, Columbia University Vagelos College of Physicians and Surgeons

Alexander Thanh Bui, Clinical Instructor. MD, University of Miami Leonard M. Miller School of Medicine

Charles Bui, Clinical Assistant Professor. MD, University of Wisconsin School of Medicine and Public Health

Phi-Yen (Gina) Bui, Clinical Assistant Professor. MD, University of Oklahoma College of Medicine

Anthony (Tony) Burgos, Associate Professor. MD, University of California, San Diego School of Medicine; MPH, University of California, Berkeley

Neeti A. Butala, Clinical Instructor. MD, Saint Louis University School of Medicine

Anna-Maria (Anna) Butera, Clinical Instructor. DO, Touro University

Jereme Patricia Butler, Clinical Assistant Professor. MD, Wake Forest University School of Medicine

Michael Butler, Clinical Instructor. MD, University of California, Irvine School of Medicine

Lisanne M. Bzoskie, Clinical Assistant Professor. MD, University of Nevada, Reno School of Medicine

Marissa L. Caballes, Clinical Assistant Professor. MD, Michigan State University College of Human Medicine; MS, Rosalind Franklin University of Medicine and Science

Sabrina Cynthia Cafaro, Member of the Faculty. MD, Geisinger Commonwealth School of Medicine

Eleanor Calma, Clinical Assistant Professor. MD, Far Eastern University – Dr. Nicanor Reyes Medical Foundation

Ellen (Elle) M. Campbell, Clinical Instructor. MD, University of Arizona College of Medicine - Tucson

Charles Cardenas, Adjunct Assistant Professor. MD, University of California, San Francisco School of Medicine; EdM, Harvard University

Kevin Carey, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Annie T. Carr, Clinical Instructor. MD, Albany Medical College

Maria Carrasco, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine; MPH, University of California, Los Angeles

Stacey Carter, Clinical Assistant Professor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Jacob Casey, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Consuelo (Connie) B. Casillas, Clinical Assistant Professor. MD, Harvard Medical School

Joe M. Casillas, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

David Cassarino, Professor. MD, University of Virginia School of Medicine; PhD, University of Virginia

Jason R. Castillo, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Hea (Helen) I. Cha, Clinical Assistant Professor. MD, University of Illinois College of Medicine

Garrick Chak, Clinical Associate Professor. MD, University of Rochester School of Medicine and Dentistry; MM, Yale University

Yervand Chakryan, Clinical Instructor. DO, Touro University Nevada College of Osteopathic Medicine; MS, University of Southern California

Elton H. Chan, Clinical Assistant Professor. MD, University of Rochester School of Medicine and Dentistry

Joseph Chan, Clinical Associate Professor. MD, Vanderbilt University School of Medicine

Odin Chan, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Shree Chanchani, Member of the Faculty. MD, University of New Mexico School of Medicine

Shreya Chandra, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Aravind Chandrashekar, Assistant Professor. MD, Duke University School of Medicine; MBA, Duke University

Charles Chang, Clinical Instructor. MD, Weill Cornell Medicine

Eric T. Chang, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Eun J. Chang, Clinical Assistant Professor. MD, Spencer Fox Eccles School of Medicine at the University of Utah

Evan Chang, Clinical Instructor. MD, New York University Grossman School of Medicine

Irene Chang, Clinical Instructor. MD, University of California, Davis School of Medicine

Jin S. Chang, Clinical Instructor. MD, American University of the Caribbean School of Medicine

Jonathan Chang, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Kevin Chang, Clinical Assistant Professor. MD, University of Washington School of Medicine

Eric Changchien, Clinical Instructor. MD, Boonshoft School of Medicine Wright State University

Kuo Chao, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA; MPH, Columbia University; MBA, New York University

Tina Chao, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Kanida T. Charuworn, Clinical Instructor. MD, Khon Kaen University Faculty of Medicine

Umer I. Chaudhry, Clinical Associate Professor. MD, University of Connecticut School of Medicine

Marisa Chavez, Clinical Assistant Professor. MD, Stanford University School of Medicine

Neil Chawla, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Fredrick M. Che, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Anita Chekuri, Clinical Assistant Professor. MD, University of the West Indies

Benjamin Chen, Clinical Assistant Professor. MD, New York Medical College

Edward T. Chen, Clinical Instructor. MD, Medical College of Ohio

Geraldine Chen, Clinical Assistant Professor. MD, University of the City of Manila

Jergin Chen, Clinical Assistant Professor. MD, Spencer Fox Eccles School of Medicine at the University of Utah; MA, Boston University

Joseph I. Chen, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Michael Chen, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Raymond H. Chen, Clinical Associate Professor. MD, Stanford University School of Medicine; DPhil, Oxford University

Thomas J. Chen, Clinical Assistant Professor. MD, Loma Linda University School of Medicine; MPH, Loma Linda University

Victor Chen, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Connie L. Cheng, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Edward C. Cheng, Clinical Instructor. MD, University of Hawai'l John A. Burns School of Medicine; MPH, University of Hawai'l, Honolulu

Geman Cheng, Clinical Instructor. MD, Albany Medical College

Glena Cheng, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Jerry C. Cheng, Associate Professor. MD, University of California, San Diego School of Medicine

Michael W.H. Cheng, Clinical Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Pamela Cheng, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Stanley Cheng, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Jocelyn S. Chen Sandoval, Clinical Instructor. MD, University of California, San Diego School of Medicine

Kimberly (Kim) K. Cheong, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Edmund W. Cheung, Clinical Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine; MPH, University of California, Los Angeles

Vincent J. Cheung, Clinical Assistant Professor. MD, Baylor College of Medicine School of Medicine

Yuri Cheung, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Amanda Chao-Yu Chi, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Margaret Chi, Clinical Assistant Professor. MD, Michigan State University College of Human Medicine; MPH, University of Southern California

Charles Chiang, Clinical Assistant Professor. MD, New York Medical College

James Chiang, Clinical Instructor. MD, Loma Linda University School of Medicine

Gary W. Chien, Clinical Associate Professor. MD, SUNY Downstate Health Sciences University College of Medicine

David (Dave) Chin, Instructor. MD, Loma Linda University School of Medicine

Kathleen Chin, Clinical Instructor. MD, Johns Hopkins University School of Medicine

Lydia Chin, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Brian Ching, Clinical Assistant Professor. MD, Rush Medical College of Rush University Medical Center

Blake Chin-Lee, Clinical Assistant Professor. MD, Penn State College of Medicine

Christopher (Chris) Chinnici, Clinical Assistant Professor. MD, University of Nevada, Reno School of Medicine

Chien-Chi F. (Frances) Chiu, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

David M. Chiu, Clinical Instructor. MD, Hahnemann University School of Medicine

Srinivas Chivukula, Clinical Assistant Professor. MD, University of Pittsburgh School of Medicine; PhD, California Institute of Technology

Christopher (Chris) Cho, Clinical Assistant Professor. MD, Loma Linda University School of Medicine Eugene Choi, Clinical Assistant Professor. MD, St George's University, School of Medicine (SGU SOM)

In-Kyu Choi, Clinical Assistant Professor. MD, Penn State College of Medicine

Kenneth Choi, Clinical Instructor. MD, Northwestern University Feinberg School of Medicine; MPH, Northwestern University

Mark W. Choi, Clinical Assistant Professor. MD, University of Miami Leonard M. Miller School of Medicine"

Sooho Choi, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Andrew Chomchuensawat, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Tamar Nazerian Chorbadjian, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MPH, University of Southern California

Fu-Sheng Chou, Clinical Associate Professor. MD, National Taiwan University; PhD, University of Cincinnati

Raymond Chou, Clinical Assistant Professor. MD, Medical College of Wisconsin

Tina Chou, Clinical Instructor. MD, Medical College of Virginia

Rajiv Choudhary, Clinical Instructor. MD, MGM Medical College; MPH, University of Wisconsin

Jayant S. Choure, Clinical Assistant Professor. MD, University of Amravati

Lori J.H. Chow, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Vivian Chow Sun, Clinical Instructor. MD, University of Michigan Medical School

Elisa Chu, Member of the Faculty. MD, University of Toledo College of Medicine and Life Sciences

Isaac H. Chu, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Michael W. Chu, Clinical Associate Professor. MD, Virginia Commonwealth University School of Medicine; MS, Chicago Medical School

Michele Chu, Clinical Assistant Professor. MD, Saba University School of Medicine

Katherine Chuang, Clinical Instructor. MD, Yale School of Medicine

Nkemdirim (Nkem) Chukwumerije, Senior Lecturer. MD, University of Nigeria; MPH, University of California, Los Angeles

Jessica H. Chun, Clinical Assistant Professor. MD, Michigan State University College of Human Medicine; MPH, University of California, Berkeley

Linda J. Chun, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Yong B. Chun, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine Delphine D. Chung, Clinical Associate Professor. MD, Northeast Ohio Medical University College of Medicine

Elena Chung, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine Kevin K. Chung, Clinical Assistant Professor. DO, Lake Erie College Of Osteopathic Medicine - Bradenton

Rose Chuong, Clinical Instructor. MD, Oregon Health & Science University College of Medicine Andrew S. Ciennik, Clinical Instructor. MD, Michigan State University College of Human Medicine Andre M. Cipta, Clinical Assistant Professor. MD, Loma Linda University School of Medicine; MDiv, The Master's Seminary

Steven N. Co, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California David S. Cohen, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Jason Coker, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Joseph (Joe) Colli, Clinical Assistant Professor. MD, The Ohio State University College of Medicine Johnathon M. Collins, Clinical Assistant Professor. MD, University of Queensland; MS, Georgetown University

Kelly M. Collon, Clinical Instructor. MD, University of Miami Leonard M. Miller School of Medicine; MPH, University of Southern California

Kristin Conn, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine Jonnel Constantino, Clinical Assistant Professor. MD, University of the East Ramon Magsaysay Memorial Medical Center

Kassandra Cooper, Clinical Assistant Professor. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Robert (Bob) Cooper, Clinical Assistant Professor. MD, Eastern Virginia Medical School at Old Dominion University

Raven Copeland, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Michelle I. Cornman, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Chad I. Correa Jr., Clinical Instructor. MD, University of California, Riverside School of Medicine

Harry A. Cosmatos, Clinical Instructor. MD, Renaissance School of Medicine at Stony Brook University

Esteban Cota, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Antonia L. Cotwright, Clinical Associate Professor. DO, Philadelphia College of Osteopathic Medicine

Diego A. Covarrubias, Clinical Assistant Professor. MD, Universidad Central del Caribe

Moises I. Cruz, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine; MPH, University of California, Berkeley; MPA, Harvard University

Stacie Cruz, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Hannaise C. Cruz-Kaberna, Clinical Instructor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Thomas (Tom) C. Cunningham, Clinical Assistant Professor. MD, Medical University of South Carolina College of Medicine

Judith (Judy) Cymerman, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

John L. Dalrymple, Professor. MD, Harvard Medical School

Renee A. D'Ambrosia, Clinical Instructor. MD, LSU Health Sciences Center School of Medicine in New Orleans

Elizabeth Dameff, Clinical Instructor. MD, Loma Linda University School of Medicine; MPH, Loma Linda University

Toan Dang, Clinical Instructor. MD, The Ohio State University College of Medicine

Trung H. Dang, Clinical Associate Professor. MD, University of California, Davis School of Medicine

Kimberly (Kim) M. Dao-King, Clinical Instructor. MD, Medical College of Georgia at Augusta University

Rouzbeh Darvishan, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Rina J. Davé, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Margaret (Meg) David, Clinical Assistant Professor. MD, Saint Louis University School of Medicine

Michael B. Davio, Clinical Instructor. MD, Loma Linda University School of Medicine

Thomas F. Day, Clinical Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Grace C. de Guzman, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Karen M. De La Cruz, Clinical Associate Professor. MD, Loma Linda University School of Medicine

Patricia De La Riva, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Joseph De Sena, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Julie Debacker, Clinical Assistant Professor. MD, Ross University School of Medicine

Amanda Degan, Clinical Assistant Professor. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Timothy (Tim) Degner, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Ahmed Dehal, Clinical Associate Professor. MD, University of Baghdad College of Medicine; MPH, Georgia Southern University

Stephanie Dekom, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Sibylle Delaloye, Clinical Assistant Professor. MD, Medical University of Innsbruck

Nicole Deppe, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Dennis Der, Clinical Associate Professor. MD, Mayo Clinic Alix School of Medicine

Prakash Desai, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MS, California State University, Long Beach

Vimal Desai, Clinical Assistant Professor. MD, Penn State College of Medicine

Jon Desilets, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Alexandra (Alex) Diamond, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Diana Diaz, Clinical Instructor. MD, University of Texas Medical Branch John Sealy School of Medicine

Matthew (Matt) Diaz, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Stephanie Diebold, Clinical Assistant Professor. MD, Paul L. Foster School of Medicine Texas Tech University Health Sciences Center

Holly N. Diep, Clinical Instructor. MD, University of California, San Diego School of Medicine

Mercie J. DiGangi, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

James P. Dinh, Clinical Assistant Professor. MD, Tufts University School of Medicine

Christopher (Chris) DiStasio, Clinical Instructor. MD, The Warren Alpert Medical School of Brown University

Gouri Diwadkar, Clinical Assistant Professor. MD, Tufts University School of Medicine

Christina Doan, Clinical Instructor. MD, University of Nevada, Reno School of Medicine

Ryan P. Doan, Clinical Instructor. MD, Cleveland Clinic Lerner College of Medicine

Darren R. Dolly, Clinical Instructor. MD, Penn State College of Medicine

Elizabeth Dong, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

David A. Donson, Clinical Assistant Professor. MD, St George's University, School of Medicine (SGU SOM)

Kathleen Doo, Clinical Assistant Professor. MD, University of Missouri-Kansas City School of Medicine

Kathleen Dor, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA

Jonathan Doris, Clinical Assistant Professor. MD, Albany Medical College; MS, University of Colorado, Denver

Neel R. Doshi, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Roberta Doucet, Clinical Assistant Professor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania

Jelena Douillard, Instructor. MD, Boonshoft School of Medicine Wright State University

Michelle Draznin, Clinical Assistant Professor. MD, University of Colorado School of Medicine

Jamie S. Drinville, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Razvan Druma, Clinical Instructor. MD, Albert Einstein College of Medicine

Stephanie Dsouza, Clinical Instructor. MD, Albany Medical College

Lorrie Dubow, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Elizabeth Duenas, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Edward J. Durant, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley

Sharon Durousseau, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley

Justin L. Dusaj, Clinical Instructor. DO, Michigan State University College of Osteopathic Medicine

Anne M. Eacker, Associate Professor. MD, University of Washington School of Medicine

Raul B. Easton-Carr, Clinical Instructor. MD, University of Iowa Roy J. and Lucille A. Carver College of Medicine; MPH, Dartmouth College

Paymon Ebrahimzadeh, Clinical Assistant Professor. DO, Touro College of Osteopathic Medicine; MPH, University of California, Los Angeles

Aaron G. Edelstein, Clinical Instructor. MD, Tufts University School of Medicine

Jennifer M. Eitel, Clinical Instructor. MD, University of Illinois College of Medicine

Janeth C. Ejike, Clinical Associate Professor. MD, University of Lagos College of Medicine

Donald Eknoyan, Assistant Professor. MD, Baylor College of Medicine School of Medicine

Dorothea H. Ellis, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

Jason M. Elperin, Clinical Instructor. DO, Touro University Nevada College of Osteopathic Medicine

Shakir E. Emel, Clinical Assistant Professor. MD, Howard University College of Medicine

Amir Entezari, Clinical Instructor. MD, Shahid Beheshti University of Medical Sciences

Diandra Escamilla, Member of the Faculty. MD, Keck School of Medicine of the University of Southern California

Dasia Esener, Clinical Associate Professor. MD, University of Sydney; MS, University of Florida

Darian R. Esfahani, Assistant Professor. MD, Loyola University Chicago Stritch School of Medicine

Pooneh Esfahani, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Liza Eshilian-Oates, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Monica-Bianca (Monica) Espiritu, Instructor. MD, Tulane University School of Medicine

Ramez Ethnasios, Assistant Professor. MD, Penn State College of Medicine

Renato Etrata, Clinical Associate Professor. MD, John A. Burns School of Medicine University of Hawaii at Manoa; PharmD, University of the Pacific

Tandik Evazyan, Clinical Instructor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Jo Everett, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Katie R. Famous, Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine; PhD, Boston University

Jason M. Fan, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Andrew Fang, Clinical Assistant Professor. MD, Loyola University Chicago Stritch School of Medicine

Amany Farid, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Michael J. Fassett, Clinical Associate Professor. MD, University of Arizona College of Medicine - Tucson

Shireen Fatemi, Associate Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science"

Hassan Fathy, Clinical Assistant Professor. MD, Cairo University Faculty of Medicine

Michael (Mike) Favazza, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Nicole Feinberg, Clinical Assistant Professor. MD, University of Arizona College of Medicine - Tucson

Mohammad (M. Houman) Fekrazad, Clinical Associate Professor. MD, Shiraz University School of Medicine

Maja A. Feldman, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine; MA, University of Maryland, College Park

Revital (Klare) Feldman, Adjunct Assistant Professor. MD, David Geffen School of Medicine at UCLA

Heather R. Fels, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine; MPH, University of Nevada, Las Vegas

Dianna P. Ferguson, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Aliya S. Ferouz-Colborn, Clinical Assistant Professor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania

Jennifer Ferrer, Clinical Assistant Professor. MD, De La Salle University

Christopher P. Filson, Professor. MD, University of Michigan Medical School

Robert M. Finch II, Adjunct Instructor. MPAP, University of Southern California (USC); MA, University of California, Riverside

David S. Finley, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

Brandon M. Firestone, Clinical Assistant Professor. MD, Medical University of South Carolina College of Medicine

Lisa Firestone, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences; MPH, Harvard University

Svetlana Fischer, Clinical Assistant Professor. MD, Sackler School of Medicine / New York State-American Program Tel Aviv University

Michael A. Flippin, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Kathryn A. Fogarty, Clinical Assistant Professor. MD, University of Missouri-Columbia School of Medicine

James Folz, Instructor. MD, University of Virginia School of Medicine

Donald Fong, Clinical Professor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine; MPH, Harvard University

Thomas H. Fong, Clinical Assistant Professor. MD, Washington University in St. Louis School of Medicine

Gareth K. Forde, Member of the Faculty. MD, University of Minnesota Medical School; PhD, Jackson State University; MBA, University of California, Irvine

Stacey H. Francis, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Raquel Franco, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Megan A. Frantz, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine

Amanda Freed, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Cynthia Freel, Clinical Assistant Professor. MD, New York Medical College

Eli Friedler, Clinical Assistant Professor. MD, Johns Hopkins University School of Medicine; MPH, University of California, Los Angeles

Mia S. Friedman, Clinical Assistant Professor. MD, Georgetown University School of Medicine; MS, Georgetown University

Diana J. Friend, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Emily Fu, Clinical Assistant Professor. MD, Ross University School of Medicine

Grace Fu, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Peter Jian Kai Fu, Clinical Instructor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Shawn Fu, Clinical Assistant Professor. MD, The Warren Alpert Medical School of Brown University

Lance C. Fuchs, Clinical Associate Professor. MD, Penn State College of Medicine

Scott T. Fujimoto, Clinical Associate Professor. DO, Touro University College of Osteopathic Medicine-California

Mark M. Fujita, Clinical Instructor. MD, Louisiana State University School of Medicine in Shreveport

Andrew M. Fukuda, Clinical Assistant Professor. MD, Loma Linda University School of Medicine; PhD, Loma Linda University

Leslie H. Fung, Clinical Assistant Professor, MD, Loma Linda University School of Medicine

Chetan Gairola, Clinical Assistant Professor. DO, Touro University College of Osteopathic Medicine-California

Sherwin Q. Gallardo, Clinical Instructor. MD, Loyola University Chicago Stritch School of Medicine

Victor Galson, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai

Rosanna M. Galzote-Carino, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Ivana L. Ganihong, Clinical Instructor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania

Jingyun (Juliana) Gao, Clinical Instructor. MD, Duke University School of Medicine

Mihran Garabedian, Clinical Instructor. MD, Ain Shams University School of Medicine

Cindy Garcia, Clinical Associate Professor. MD, Universidad Autonoma de Guadalajara Facultad de Medicine

Jose M. Garcia, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA Mariela I. Garcia, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA Mercedes (Mercy) M. Garcia, Clinical Assistant Professor. MD, Universidad Central Del Este Michael R. Garcia, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA Arlene D. Garingo, Clinical Associate Professor. MD, University of California, Davis School of Medicine

Amanda Garner, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Timothy J. Garvey, Clinical Instructor. MD, University of California, Irvine School of Medicine David Garza, Clinical Assistant Professor. MD, University of Illinois College of Medicine Judith Garza, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

James (Claude) Gauthier, Clinical Assistant Professor. MD, Dalhousie University

Frew H. Gebreab, Clinical Instructor. MD, Jimma Institute of Health sciences

Jared A. Geibig, Clinical Instructor. MD, Tufts University School of Medicine

Monique George, Clinical Associate Professor. MD, University of Otago School of Medicine

Stanford Gertler, Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Vanessa S. Ghaderi, Instructor. MD, Keck School of Medicine of the University of Southern California

Delaram Ghadishah, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Negar Ghahramani, Clinical Assistant Professor. PhD, University of California, Los Angeles; MS, San Diego State University

Shahram Gharibshahi, Clinical Instructor. MD, Islamic Azad University

Tiffany R. Ghatan, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Christian S. Ghattas, Clinical Assistant Professor. MD, Meharry Medical College School of Medicine

Ali Ghobadi, Associate Professor. MD, University of California, San Diego School of Medicine

Saif A. Ghole, Clinical Assistant Professor. MD, Yale School of Medicine

Ericka C. Gibson, Clinical Assistant Professor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania; MPH, Johns Hopkins University

Jason Gilbert, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Deborah Y. Gililland, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Victoria F. Gillis, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Jane L. Gin, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Mahlet D. Girma, Clinical Assistant Professor. MD, Ross University School of Medicine

Michael R. Girvigian, Clinical Assistant Professor . MD, Drexel University College of Medicine

Robyn Glezer, Clinical Instructor. DO, Touro College of Osteopathic Medicine

Eduardo Godoy, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Navneet K. Gogia, Clinical Instructor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Choon Hwa (Anne) H. Goh, Clinical Associate Professor. MD, University of Tasmania; MPH, University of California, Berkeley

Bruce J. Goldberg, Associate Professor. MD, New York University Grossman School of Medicine; MS/PhD, New York University

Alexander M. Goldman, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Giancarlo Gomez, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai

Luis D. Gomez Villalobos, Member of the Faculty. MD, Keck School of Medicine of the University of Southern California

Gustavo V. Gonzalez, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

José González, Adjunct Assistant Professor. MD, Rush Medical College of Rush University Medical Center

Francisco J. Gonzalez-Franco, Clinical Assistant Professor. MD, Universidad Iberoamericana

Danielle E. Goodrich, Assistant Professor. MD, University of Maryland School of Medicine

Charles A. Gordon, Member of the Faculty. MD, University of California, San Diego School of Medicine

Kristin Gotimer, Clinical Assistant Professor. DO, New York College of Osteopathic Medicine; MPH, New York University

Jessica Gould, Clinical Assistant Professor. MD, Lewis Katz School of Medicine at Temple University

Rahim S. Govani, Clinical Assistant Professor. MD, St George's University, School of Medicine (SGU SOM)

Deepthiman (Deepu) Gowda, Associate Professor. MD, University of North Carolina School of Medicine; MPH, Harvard University; MS, Columbia University

Mark L. Graber, Adjunct Senior Lecturer. MD, Stanford University School of Medicine

Hege Grande Sarpa, Clinical Associate Professor. MD, University of California, Davis School of Medicine

Rebecca C. Graves, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Shaunte M. Gray, Clinical Assistant Professor. MD, University of Illinois College of Medicine; MS, California State University, Dominguez Hills

Daniel J. Green, Clinical Assistant Professor. MD, University of North Carolina School of Medicine; MPH, University of North Carolina

Michael (Mike) M.B. Green, Clinical Assistant Professor. MD, Howard University College of Medicine; MBA, University of Notre Dame

Kerry L. Griffin, Clinical Assistant Professor. MD, Frederick P. Whiddon College of Medicine at the University of South Alabama

Abby E. Gross, Clinical Instructor. MD, Yeshiva University, Albert Einstein College of Medicine

Yi Guan, Member of the Faculty. MD, Beijing Medical University; PhD, University of California, Berkeley

Kevin M. Guber, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Alexander (Alex) Guillaume, Clinical Assistant Professor. MD, USF Health Morsani College of Medicine

Mittul Gulati, Clinical Associate Professor. MD, University of California, San Francisco School of Medicine

Jonathan Gullett, Clinical Assistant Professor. MD, University of Central Florida College of Medicine

Atul Gupta, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Nigel Gupta, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Ruben Guzman-Marin, Clinical Assistant Professor. MD, Universidad Nacional Autónoma de México Facultad de Medicina; PhD, Universidad Nacional Autónoma de México

Eunice Hagen, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Philip (Phil) I. Haigh, Clinical Professor. MD, University of Calgary Cumming School of Medicine; MSc, University of Toronto

Atieh (Ati) Hajianpour, Clinical Instructor, MD, School of Medicine; MS, School of Hygiene

Merita Halilhodzic, Clinical Assistant Professor. MD, University of Sarajevo School of Medicine

David J. Hall, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Laura E. Halpin, Clinical Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences; PhD, University of Toledo

Joni L. Hamilton, Clinical Instructor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Carol Han, Clinical Assistant Professor. DO, Midwestern University Chicago College of Osteopathic Medicine

Paul Han, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Timothy (Tim) D. Hanaway, Clinical Assistant Professor. MD, University of Missouri-Kansas City School of Medicine

Mariam S. Hanna, Clinical Instructor. MD, Al-Nahrain University School Of Medicine

Stephanie C. Hanna, Clinical Instructor. MD, University of California, San Diego School of Medicine

David J. Hannauer, Clinical Instructor. MD, University of California, Davis School of Medicine; JD, University of San Diego; JD, University of San Diego

Priscilla P. Hanudel, Clinical Assistant Professor. MD, Harvard Medical School

Priya S. Harder, Clinical Assistant Professor. MD, Drexel University College of Medicine

Tina Hardley, Clinical Instructor. MD, University of California, San Diego School of Medicine

Neema Hariri, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Omid R. Hariri, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Ashley N. Hart, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Roger Hartman, Clinical Assistant Professor. MD, Rutgers, Robert Wood Johnson Medical School

Sharon Hartmans, Assistant Professor. MD, University of Illinois College of Medicine

Benjamin G. Hassid, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Vivienne Hau, Clinical Assistant Professor. MD, University of Arizona College of Medicine - Tucson; PhD, University of Arizona - Tucson

Andrea F. Hawthorne, Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Harleen K. Hayreh, Clinical Instructor. MD, Kasturba Medical College

Aaron C. Heffner, Clinical Assistant Professor. DO, Touro University College of Osteopathic Medicine-California

Amy N. Heffner, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California

Brian P. Hendrickson, Clinical Instructor. MD, Georgetown University School of Medicine

Julie Henriksen, Clinical Associate Professor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine; MBA, Kaplan Higher Education

Irma Hernandez, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Antonio T. Hernandez Conte, Clinical Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine; MBA, University of California, Irvine

Frances Hetherington, Clinical Instructor. MD, Michigan State University College of Human Medicine

Michael (Mickey) L. Hibbard, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Patrick Hickey, Clinical Associate Professor. DO, Michigan State University College of Osteopathic Medicine

Darren Meyer Himeles, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

La Tanya R. Hines, Assistant Professor. MD, University of California, Irvine School of Medicine

Allen Ho, Clinical Assistant Professor. MD, Harvard Medical School

Brian Ho, Member of the Faculty. MD, Saint Louis University School of Medicine

Cynthia Ho, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Jessica M. Ho, Clinical Assistant Professor. MD, Baylor College of Medicine School of Medicine

Taylor Ho, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Wendy Ho, Clinical Instructor. MD, Albany Medical College; MPH, Loma Linda University; MS, University of California, Los Angeles

Nghi V. Hoang, Clinical Instructor. MD, Wake Forest University School of Medicine

Thanh (Vincent) T. Hoang, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Uyen Hoang, Clinical Instructor. DO, Philadelphia College of Osteopathic Medicine

Teresa V. Hoang-Wu, Clinical Instructor. MD, University of California, Davis School of Medicine; MS, Albert Einstein College of Medicine

Michael Hochman, Adjunct Associate Professor. MD, Harvard Medical School; MPH, University of California, Los Angeles

Diana Hoffman, Member of the Faculty. MD, Ben-Gurion University of The Negev/Columbia University

Trevor Hoffman, Associate Professor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania; PhD, University of Pennsylvania

Tiffany A. Hogan, Assistant Professor. MD, Rutgers, Robert Wood Johnson Medical School

Duong V. Ho-Hoang, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California; MEd, Loyola Marymount University

William Holliday, Clinical Instructor. MD, University of Pittsburgh School of Medicine

James S. Hong, Clinical Assistant Professor, MD, Loma Linda University School of Medicine

Christopher J. Horan, Clinical Assistant Professor. MD, New York Medical College

Robert E. Horner, Adjunct Instructor. MS, Pacific University College of Health Professionals

Atoosa Hosseini, Clinical Assistant Professor. DO, Midwestern University Arizona College of Osteopathic Medicine

Anthony Hou, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Randy Hou, Clinical Instructor. MD, Saint Louis University School of Medicine; MS, Georgetown University

Adam Bennet Howard, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

William (Bill) M. Howell, Clinical Assistant Professor. MD, Georgetown University School of Medicine; MS, University of Scranton

Margaret Hsiau, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Brian Hsieh, Clinical Instructor. MD, State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine

Ben M. Hsu, Clinical Assistant Professor. MD, University of Maryland School of Medicine

Emily Hsu, Clinical Assistant Professor. MD, St George's University, School of Medicine

Jeffrey H. Hsu, Clinical Associate Professor. MD, New York Medical College

Joe Y. Hsu, Clinical Assistant Professor. MD, Tufts University School of Medicine

Richard Hsu, Member of the Faculty. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Edward Hu, Clinical Instructor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Grace Hu, Clinical Instructor. MD, New York Medical College

Kenneth H. Hu, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Kevin H. Hu, Clinical Assistant Professor. MD, University of Maryland School of Medicine

Feng Hua, Clinical Instructor. MD, Beijing Medical University

Susan Hua, Clinical Instructor. MD, University of Florida College of Medicine

Cheng-Wei (Charlie) Huang, Clinical Assistant Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Gene Huang, Clinical Associate Professor. MD, Northeast Ohio Medical University College of Medicine

Kenneth (Kenny) Y. Huang, Clinical Assistant Professor. MD, New York Medical College

Po-Yin Samuel Huang, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Robert D. Huggins, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Michael J. Hui, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Hascal O. Humes II, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Charles S. Hummel, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA; PhD, University of California, Los Angeles

Julia Hutchison, Clinical Assistant Professor. DO, Pacific Northwest University of Health Sciences College of Osteopathic Medicine

Dan Huynh, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Kelly T. Huynh, Clinical Assistant Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Nhan (Peter) Huynh, Clinical Assistant Professor. MD, New York Medical College

Phung M. Huynh, Clinical Instructor. MD, University of California, Davis School of Medicine

Thanh M. Huynh, Clinical Associate Professor. MD, Oregon Health & Science University College of Medicine

Toai T. Huynh, Clinical Assistant Professor. MD, Medical College of Georgia at Augusta University

Cathy Hwang, Clinical Assistant Professor. MD, Drexel University College of Medicine

James C. Hwang, Clinical Instructor. MD, St. George's University School of Medicine

Jane Hwang, Clinical Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Jason S. Hwang, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Jennifer Y. Hwang, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Juliet H. Hwang, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai Michael Hwang, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Abbas Hyderi, Adjunct Professor. MD, University of Illinois College of Medicine; MPH, Portland State University

Sung Hyon, Clinical Assistant Professor. MD, Drexel University College of Medicine

Anne M. Ichiuji, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Jerrelyn Inocencio-Diaz, Assistant Professor. MD, University of California, Davis School of Medicine; MPH, University of California, Los Angeles

John M. Iskander, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Marika Issakhanian, Clinical Instructor. MD, Tulane University School of Medicine

Masamichi (Mike) Ito, Clinical Associate Professor. PhD, University of Southern California

Marcus K. Iwane, Clinical Instructor. MD, University of Hawai'l John A. Burns School of Medicine

Kathryn Iwata, Clinical Instructor. MD, New York University Grossman School of Medicine

Sara (Sarah) Jacob, Clinical Assistant Professor. MD, Jawaharlal Nehru Medical College

Namita Jain, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine; MPH, Dartmouth College

Sushil K. Jain, Clinical Assistant Professor. MD, University of Chicago Division of the Biological Sciences, The Pritzker School of Medicine; MBA, University of Chicago

Peter B. Jalbuena, Clinical Assistant Professor. MD, University of Santo Tomas Faculty of Medicine and Surgery

Ali Jamshidi, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Sarah Javaherifar, Clinical Instructor. MD, University of Arizona College of Medicine - Phoenix

Madhangi Jayaraman, Clinical Instructor. MD, University of California, Irvine School of Medicine; MPH, University of California, Los Angeles

Dongmei Jiang, Clinical Instructor. MD, Beijing Medical University; PhD, University of Southern California; MS, Beijing Medical University

Ricardo E. Jimenez-Kimble, Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Samir Johna, Clinical Professor. MD, University of Baghdad College of Medicine

Megan C. Johnson, Clinical Assistant Professor. MD, University of Iowa Roy J. and Lucille A. Carver College of Medicine

Ambrisha Joshi, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Gregory Juarez, Clinical Assistant Professor. MD, Harvard Medical School; MPH, University of California, Los Angeles; MHCM, Harvard University

Henry Jung, Clinical Associate Professor. MD, Harvard Medical School

Sandy Y. Jung-Wu, Clinical Associate Professor. MD, Rush Medical College of Rush University Medical Center

Daniel (Dan) Kahsai, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Ruby P. Kalra, Clinical Assistant Professor. MD, University of Illinois College of Medicine

Keira L. Kamm, Clinical Assistant Professor. MD, Southern Illinois University School of Medicine

Irene O. Kan, Clinical Assistant Professor. MD, Albany Medical College

Meera D. Kanani, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Monica P. Kandavel, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Abdullah Kandil, Clinical Instructor. MD, Tufts University School of Medicine

Celeste Y. Kang, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Mark Kang, Clinical Assistant Professor. MD, Drexel University College of Medicine; MPH, University of California, Los Angeles

Kartik Kansagra, Clinical Instructor. MD, Tulane University School of Medicine

Mandy C. Kao, Clinical Assistant Professor. MD, Medical College of Wisconsin

Rachel Kaplan, Clinical Assistant Professor. DO, Touro University Nevada College of Osteopathic Medicine

John A. Kare, Clinical Assistant Professor. MD, University of Illinois College of Medicine

Hamed Kargozaran, Clinical Assistant Professor. MD, Penn State College of Medicine

Sanaz Karimi, Clinical Instructor. MD, Tehran University Medical Sciences

Benjamin C. Kaska, Adjunct Lecturer. MPAP, University of Southern California (USC) Keck School of Medicine

Christine I. Kassissa, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Christopher (Chris) Katsura, Clinical Assistant Professor. MD, Lewis Katz School of Medicine at Temple University

Poonam Kaushal, Clinical Assistant Professor. MD, New York Medical College

Sandeep (Sandy) K. Kaushal, Clinical Assistant Professor. MD, Medical University of Silesia School of Medicine

Paul Kazimiroff, Clinical Instructor. MD, University of New Mexico School of Medicine

Jonathan Kei, Clinical Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University; MPH, University of California, Los Angeles

Kamal Kejriwal, Clinical Instructor. MD, University of Rajasthan Sanai Man Singh Medical College

Janet Keller, Clinical Assistant Professor. MD, Yale School of Medicine; MHS, Yale University

Melissa C. Kelly, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California

Stephan Kempiak, Clinical Instructor. MD, Yeshiva University, Albert Einstein College of Medicine; PhD, Albert Einstein College of Medicine

Geoffrey K. Kenyota, Clinical Associate Professor. MD, SUNY Downstate Health Sciences University College of Medicine

Jeffrey I. Kessler, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine

Arsineh Khachekian, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Firhana Khairullah, Clinical Associate Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Mohammad (Cyrus) Khaledy, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Dennis Khalili-Borna, Clinical Instructor. MD, University of California, Davis School of Medicine

Jameel J. Khan, Clinical Instructor. MD, Ross University School of Medicine; MSEd, Niagara University

Najeeb Khan, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Shehma Khan, Clinical Assistant Professor. MD, JSS Medical College

Sonya Khan, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Peter Khang, Clinical Associate Professor. MD, University of Connecticut School of Medicine; MPH, University of Connecticut

Arash Kharestan, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Ali Khazaei Nezhad, Clinical Assistant Professor. MD, Mashhad University of Medical Sciences

Joan Kho, Clinical Instructor. MD, New York Medical College

Amir Khoiny, Clinical Instructor. MD, University of Hawai'l John A. Burns School of Medicine

Ary Kian, Clinical Assistant Professor. MD, Ross University School of Medicine

Benjamin B. Kim, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine

Carole H. Kim, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Christina Kim, Clinical Associate Professor. MD, New York Medical College

David Kim, Clinical Assistant Professor. MD, The Warren Alpert Medical School of Brown University

Dohwa Kim, Clinical Assistant Professor. MD, Yonsei University College of Medicine

Dolly Kim, Clinical Assistant Professor. MD, Punjab University Dayanand Medical College; MBA, Johnson and Wales University

Holly H. Kim, Clinical Assistant Professor. MD, McGovern Medical School at The University of Texas Health Science Center at Houston

Hoon Kim, Clinical Instructor. MD, Albany Medical College

Hyungkoo Kim, Clinical Instructor. MD, Loma Linda University School of Medicine

Joon W. Kim, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Marvin Kim, Clinical Instructor. MD, New York University Grossman School of Medicine

Michelle Kim, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Philip Kim, Clinical Associate Professor. MD, Northwestern University Feinberg School of Medicine; MPH, Harvard University

Sandra D. Kim, Clinical Assistant Professor. MD, Wake Forest University School of Medicine

Simon Kim, Clinical Instructor. MD, New York University Grossman School of Medicine

William H. Kim, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Young I. Kim, Adjunct Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MPH, University of Southern California

Alicia L. King, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Nikolaos Kiouranakis, Clinical Assistant Professor. MD, Capodistrian University of Athens

Natwalee (Nat) Kittisarapong, Clinical Assistant Professor. DO, Nova Southeastern University Dr. Kiran C. Patel College of Osteopathic Medicine

Marc Klau, Assistant Professor. MD, University of Connecticut School of Medicine; MBA, California State University, Fullerton

Melissa Klausmeyer, Clinical Associate Professor. MD, The Ohio State University College of Medicine

Brian M. Kleker, Clinical Instructor. MD, University of Colorado School of Medicine

Eleonora Kleyman, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Brittany L. Klooster, Clinical Assistant Professor. MD, Medical College of Wisconsin

Cindy Ko, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai

Michele S. Ko, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Christine D. Kofman, Clinical Assistant Professor. MD, Geisel School of Medicine at Dartmouth

Mitra Kohan, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science; MS, Rosalind Franklin University of Medicine and Science

Kiavash R. Koko, Clinical Instructor. MD, Drexel University College of Medicine

Christina K. Kopatz, Clinical Instructor. MD, University of California, Irvine School of Medicine

Panda Korman, Clinical Instructor. MD, Penn State College of Medicine

Priyanka Kosaraju, Member of the Faculty. MD, University of California, Irvine School of Medicine

Anne E. Kosco, Clinical Instructor. MD, Medical College of Pennsylvania

Ali R. Khoshkish, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Maher S. Kozman, Clinical Associate Professor. MD, Ain Shams University School of Medicine

Gregory Krastein, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

William Krauss, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Marit Kay Kreidel, Clinical Assistant Professor. MD, New York Medical College

Shree J. Krishnan, Clinical Associate Professor. MD, University of the West Indies

Ramya Kuchibhatla, Clinical Instructor. MD, Rush Medical College of Rush University Medical Center

Dean Kujubu, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA

Manish Kumar, Clinical Instructor. MD, Kasturba Medical College

Nishant Kumar, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Nicole Kurzbard-Roach, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Anne M. Kuwabara, Clinical Assistant Professor. MD, Johns Hopkins University School of Medicine

Joseph Kwack, Clinical Instructor. MD, Albany Medical College

Karen W. Kwan, Assistant Professor. MD, University of California, Davis School of Medicine

Mei W. Kwan, Clinical Assistant Professor. MD, Lewis Katz School of Medicine at Temple University

Karl Kwok, Member of the Faculty. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Ruben Lachica, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley

Anissa LaCount, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Sari Lahham, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine; MBA, University of California, Irvine

Shadi Lahham, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

Christy Lai, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Lawrence P. Lai, Clinical Assistant Professor. MD, Drexel University College of Medicine

Phong Lai, Member of the Faculty. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Saien Lai, Assistant Professor. MD, Wayne State University School of Medicine

Anthony W. Lam, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Bryan Lam, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Cuong Lam, Clinical Associate Professor. MD, University of California, Irvine School of Medicine; MBA, University of California, Irvine

Michael H. Land, Clinical Associate Professor. MD, Wake Forest University School of Medicine

Annette Langer-Gould, Clinical Professor. MD, University of Pittsburgh School of Medicine; PhD, Stanford University; MS, Stanford University

Elisa D. Lansdowne, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Diana C. Laplace, Clinical Associate Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Jeff Lapoint, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Martha Lara, Clinical Instructor. MD, Renaissance School of Medicine at Stony Brook University

Marc J. LaRiviere, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Andrew Larson, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Mehrbanoo Lashai, Clinical Assistant Professor. MD, American University of Antigua College of Medicine

Mark Lassoff, Clinical Associate Professor. MD, Rutgers, Robert Wood Johnson Medical School; MPH, University of Medicine and Dentistry of New Jersey

David L. Lau, Clinical Assistant Professor. MD, Wayne State University School of Medicine

Ryan P. Lau, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Bernadette U. Laxa, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Cynthia C. Lazzaro, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Duy Le, Clinical Instructor. MD, Saint Louis University School of Medicine

Margeaux C. Le, Clinical Assistant Professor. MD, Medical College of Wisconsin

Michael H. Le, Member of the Faculty. DO, Ohio University Heritage College of Osteopathic Medicine

Phi-Nga (Phi) Le, Clinical Assistant Professor. MD, Creighton University School of Medicine

Tri T. Le, Clinical Assistant Professor. MD, Creighton University School of Medicine; MS, University of Michigan

Willian Allen Leavitt, Member of the Faculty. MD, Keck School of Medicine of the University of Southern California

Mateo Levine Ledezma, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Brian Lee, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

David Lee, Clinical Instructor. MD, Loma Linda University School of Medicine

Dong-Joon (DJ) Lee, Clinical Assistant Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Eric Anthony (Tony) Lee, Associate Professor. MD, David Geffen School of Medicine at UCLA

Eric K. Lee, Clinical Instructor. MD, University of California, Berkeley (UCB) / University of California, San Francisco (UCSF) Joint Medical Program

Erin Lee, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Ernest E. Lee, Clinical Assistant Professor, MD, University of Michigan Medical School

Han D. Lee, Clinical Instructor. MD, American University of the Caribbean School of Medicine

Heather F. Lee, Clinical Instructor. MD, University of Miami Leonard M. Miller School of Medicine

Henry Hyun Doo Lee, Clinical Instructor. MD, Loma Linda University School of Medicine

James C. Lee, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Jay Lee, Clinical Assistant Professor. MD, New York Medical College

Jennifer A. Lee, Clinical Assistant Professor. MD, Creighton University School of Medicine; MA, Loyola University, Chicago

Jonathan H. Lee, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Juhee Elsa Lee, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Julie J. Lee, Clinical Instructor. MD, University of California, San Diego School of Medicine

Jung-Sup Lee, Clinical Instructor. MD, Loma Linda University School of Medicine

Kuo-Wei Lee, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Lauren Lee, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Lloyd M. Lee, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Mark Y. Lee, Clinical Instructor. MD, New York University Grossman School of Medicine

Mingsum Lee, Clinical Professor. MD, Columbia University Vagelos College of Physicians and Surgeons; PhD, Harvard University; MS, Yale University

Myung-Moo Lee, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Ray J. Lee, Clinical Assistant Professor. MD, Washington University in St. Louis School of Medicine

Richard K. Lee, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Richard W. Lee, Clinical Instructor. MD, Boonshoft School of Medicine Wright State University

Robert Lee, Clinical Assistant Professor. DO, Touro University College of Osteopathic Medicine-California; MS, Georgetown University

Sohyun Lee, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Stephen (Steve) P. Lee, Clinical Assistant Professor. MD, University of Maryland School of Medicine

Steven M. Lee, Clinical Associate Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Susan Y. Lee, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Te-ie I. Lee, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Amy Lee Kumar, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Mijin Lee-Brown, Clinical Instructor. MD, Tufts University School of Medicine

Mary Lee-Henderson, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Christian A. Lee-Rodriguez, Clinical Assistant Professor. MD, Howard University College of Medicine; MS, California State University, Northridge

Cathy Lee-Shin, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Timothy Leifer, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Ilya Lekht, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Michael Leonardi, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Anna M. Leung, Associate Professor. MD, Virginia Commonwealth University School of Medicine

Alexander O. Levy, Clinical Instructor. MD, Tbilisi State Medical University; PhD, Tbilisi State Medical University; MPH, University of California, Berkeley

Marc Levy, Clinical Instructor. MD, Baylor College of Medicine School of Medicine

Wesley Lew, Clinical Assistant Professor. MD, Wake Forest University School of Medicine

Aleksandr G. Lewicki, Clinical Instructor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Bruno Lewin, Assistant Professor. MD, David Geffen School of Medicine at UCLA

Keith Lewis, Assistant Professor. MD, University of California, San Diego School of Medicine

Meredith Lewis, Clinical Instructor. MD, University of Nevada, Reno School of Medicine

Roya Lewis, Assistant Professor. MD, St George's University, School of Medicine

Lhara Sumarriva Lezama, Clinical Assistant Professor. MD, Universidad Privada de Tacna

Michael Li, Clinical Instructor. MD, New York Medical College

Ting Li, Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences

Brannen Liang, Clinical Instructor. MD, Frank H. Netter MD School of Medicine at Quinnipiac University

Conrad Liang, Clinical Assistant Professor. MD, Oregon Health & Science University College of Medicine; PhD, University of Maryland, Baltimore

Jonathan Liang, Clinical Associate Professor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania; MPH, University of California, Berkeley

Kevin Liao, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Max E. Liebl, Clinical Assistant Professor. MD, Medical College of Wisconsin

Albert Lim, Clinical Assistant Professor, MD, University of Washington School of Medicine

Amy M. Lim, Clinical Assistant Professor. MD, St George's University, School of Medicine

Joanna C. Lim, Clinical Assistant Professor. MD, Eastern Virginia Medical School at Old Dominion University

John Lim, Clinical Instructor. MD, University of Michigan Medical School

Lisa H. Lim, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Alice Lin, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Christopher Lin, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Henry K. Lin, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Jeffery S. Lin, Member of the Faculty. MD, Baylor College of Medicine School of Medicine

Jennifer H. Lin, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Kelly Y. Lin, Member of the Faculty. MD, David Geffen School of Medicine at UCLA

Raymond R. Lin, Clinical Instructor. MD, Our Lady of Fatima University The Fatima College of Medicine

Tammy Lin, Clinical Assistant Professor. MD, University of Michigan Medical School

Tina Lin, Clinical Assistant Professor. MD, Columbia University Vagelos College of Physicians and Surgeons

Ting-Yi Lin, Clinical Assistant Professor. MD, Stanford University School of Medicine; PhD, Stanford University

Jennifer D. Linzmeyer, Clinical Associate Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Robert D. Liou, Clinical Assistant Professor. MD, Baylor College of Medicine School of Medicine

Samuel H. Lipkin, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Kerry C. Litman, Assistant Professor. MD, David Geffen School of Medicine at UCLA

Aihong Liu, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California; PhD, University of Southern California

Angela J. Liu, Clinical Assistant Professor. MD, Lewis Katz School of Medicine at Temple University

Fred Liu, Clinical Instructor. MD, University of California, San Diego School of Medicine

Jasen Liu, Member of the Faculty. MD, University of Wisconsin School of Medicine and Public Health

Michael D. Liu, Clinical Associate Professor. MD, University of California, Irvine School of Medicine; MBA, University of California, Irvine

Michael X. Liu, Clinical Instructor, MD, Tulane University School of Medicine

Raymond Liu, Clinical Assistant Professor. MD, University of Chicago Division of the Biological Sciences, The Pritzker School of Medicine

Alexander Dayton Lofthus, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Amir Nicholas Lofty, Clinical Instructor. MD, Southern Illinois University School of Medicine

Jennifer (Jen) Loh, Associate Professor. MD, George Washington University School of Medicine and Health Sciences

Veronica M. Lois, Clinical Assistant Professor, MD, Ross University School of Medicine

Chelsea Loji, Clinical Instructor. DO, Michigan State University, College of Osteopathic Medicine

Dana K. Loo, Clinical Assistant Professor. MD, Yale School of Medicine

Gabriel (Gabe) E. López, Assistant Professor. MD, David Geffen School of Medicine at UCLA

Mary M. Lopez, Adjunct Senior Lecturer. PhD, Azusa Pacific University

Brent Lorenzen, Clinical Assistant Professor. MD, Vanderbilt University School of Medicine; MA, University of California, Berkeley

Carrie Louie, Clinical Instructor. PhD, University of California, San Diego (UCSD)

Cheri Ann Lowre, Member of the Faculty. MD, Columbia University Vagelos College of Physicians and Surgeons

Thuy P. Lu, Clinical Instructor. MD, Heinrich-Heine Universitat-Medizinische

Marisol S. Luna-Pizano, Clinical Assistant Professor. MD, Tufts University School of Medicine; MPH, Tufts University

Serena Luong, Clinical Instructor. DO, Des Moines University College of Osteopathic Medicine

Carla Lupi, Professor. MD, University of California, San Francisco School of Medicine

Jenna Luu, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Johnny Luu, Clinical Assistant Professor. MD, Medical College of Wisconsin

Lisa P. Luu, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Mitchell N. Luu, Clinical Associate Professor. MD, University of California, San Francisco School of Medicine

Ricky L. Luu, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Cong (Randy) T. Ly, Member of the Faculty. DO, Touro University Of California - College Of Osteopathic Medicine

Kathleen A. Lytal, Clinical Assistant Professor. MD, University of Louisville School of Medicine

Timothy Maarup, Clinical Assistant Professor. MD, Loyola University Chicago Stritch School of Medicine

Jacques Machol, Clinical Assistant Professor. MD, Medical College of Wisconsin

Douglas K. Mack, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Troy H. Maetani, Clinical Assistant Professor. MD, SUNY Downstate Health Sciences University College of Medicine

Derek D. Mafong, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Jeremy G. Maggin, Clinical Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Liesbeth V. Maggiotto, Clinical Assistant Professor. MD, Rijksuniversiteit Limberg/Maastricht University Medical School

Laura H. Magtoto, Clinical Instructor. MD, University of California, Irvine School of Medicine

Kevin P. Maher, Clinical Assistant Professor. MD, Rush Medical College of Rush University Medical Center

Nakia (Nickie) T. Mainor, Clinical Assistant Professor. MD, Loyola University Chicago Stritch School of Medicine

Kamran Majid, Clinical Assistant Professor. MD, Medical College of Pennsylvania

Rowena K. Mak, Member of the Faculty. MD, Keck School of Medicine of the University of Southern California

Meriam S. Makary-Botros, Instructor. MD, Loma Linda University School of Medicine

Vikram Makhijani, Clinical Assistant Professor. DO, Touro University College of Osteopathic Medicine-California

Ryon T. Maland, Clinical Instructor. MD, Drexel University College of Medicine

Gregory (Greg) Maletis, Clinical Professor. MD, David Geffen School of Medicine at UCLA

Mohammad Malik, Clinical Assistant Professor. MD, B. Zakariya University Nishtar Medical College

Benjamin D. Malkin, Clinical Professor. MD, Icahn School of Medicine at Mount Sinai

Bryan F. Maltby, Clinical Instructor. MD, University of Texas Medical Branch John Sealy School of Medicine; MA, University of Texas at Austin

Raymond Malveaux Jr., Clinical Assistant Professor. MD, Howard University College of Medicine

Ravindhra C. Mamilla, Clinical Assistant Professor. MD, St George's University, School of Medicine (SGU SOM)

Jeremy Man, Clinical Assistant Professor. MD, University of Alberta Faculty of Medicine

Sonty Man, Clinical Assistant Professor. MD, New York Medical College

Danielle Manalo, Clinical Assistant Professor. MD, Loyola University Chicago Stritch School of Medicine

Shiny Mandla, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Premalata (Prema) Manickam, Clinical Assistant Professor. MD, Madras University, Stanley Medical College and Hospital

Steven Mann, Clinical Assistant Professor. MD, Sackler School of Medicine / New York State-American Program Tel Aviv University

Adeline Manohar, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Pej Manoochehri, Clinical Instructor. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Prasanth Manthena, Clinical Associate Professor. MD, Northeast Ohio Medical University College of Medicine

Bradley E. Manubay, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MS, Georgetown University

Melissa M. Mardiros, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Jeffrey de Castro Mariano, Assistant Professor. MD, University of California, San Francisco School of Medicine

Arnold Markman, Clinical Instructor. MD, Yale School of Medicine

Frank H. Marquez, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Nishi V. Marquez, Clinical Instructor. MS, University of Texas Health Science Center; DO, Western University of Health Sciences

Kevin Marsee, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Jeffrey S. Marsh, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Carlos Martinez-Balzano, Member of the Faculty. MD, Central University of Venezuela

Ehrnad J. Marzo, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Hossein Masoomi, Clinical Associate Professor. MD, Islamic-Azad University

Navid H. Massoudi, Clinical Instructor. MD, St. George's University School of Medicine

Yen Ling Masters, Clinical Associate Professor. MD, University of Calgary Cumming School of Medicine

Mudit Mathur, Associate Professor. MD, University of Delhi Maulana Azad Medical College; MBA, University of California, Irvine

Anne Matich, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Catalina Matiz, Clinical Associate Professor. MD, Universidad Nacional de Colombia

Nazanin Matloubi, Clinical Instructor. MD, Jawaharlal Nehru Medical College

Christopher D. Mauger, Clinical Instructor. MD, Albany Medical College

Maria Rosario (Maria) Maun, Clinical Assistant Professor. MD, University of Santo Tomas Faculty of Medicine and Surgery

Joshua May, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Brandan Mayer-Blackwell, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

Paul Christian Mayor, Clinical Assistant Professor. MD, Medical College of Georgia at Augusta University; MS, University of Buffalo

Fariborz Mazdisnian, Clinical Assistant Professor. MD, Medical College of Wisconsin; MBA, University of California, Los Angeles

Kyle F. McCallin, Clinical Assistant Professor. DO, Touro University Nevada College of Osteopathic Medicine

Patrick Eugene McCleskey, Clinical Associate Professor. MD, Emory University School of Medicine

Robert G. Mccormick, Clinical Instructor. MD, New York Medical College

Laura S. Mccracken, Clinical Assistant Professor. MD, Indiana University School of Medicine

Alex McDonald, Assistant Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Eric McGary, Associate Professor. MD, Tulane University School of Medicine; PhD, Tulane University; MPH, Tulane University

Christopher J. McGilmer, Clinical Assistant Professor. MD, University of Washington School of Medicine

Emily L. McGinnis, Clinical Assistant Professor. MD, SUNY Downstate Health Sciences University College of Medicine

Mary-Katherine McGovern, Clinical Assistant Professor. MD, University of Texas Southwestern Medical School

Ann E. McIntosh, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine

Scott A. McIver, Clinical Associate Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Douglas (Ian) McLachlan, Clinical Assistant Professor. MD, Duke University School of Medicine; MPH, University of North Carolina

Kayla C. McLaughlin, Clinical Lecturer. MPAS, Chatham University

Elisabeth (Lisa) C. McLemore, Clinical Professor. MD, University of Virginia School of Medicine

Yvette Drake McLin, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Christopher Francis McNicoll, Member of the Faculty. MD, Michigan State University College of Human Medicine; MPH, Boston University; MA, Boston University

Donald P. Mebust, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA

Swati Medhekar, Clinical Assistant Professor. MD, Topiwala National Medical College

Dutt C. Mehta, Clinical Assistant Professor. DO, Touro University Nevada College of Osteopathic Medicine

Sarjak S. Mehta, Clinical Assistant Professor. MD, Smt. NHL Municipal Medical College

Jessica Meir, Member of the Faculty. MD, Albany Medical College

Ricardo Bardales Mendoza, Clinical Instructor. MD, University of Illinois College of Medicine

Sofia Elena Meraz, Clinical Assistant Professor. MD, Stanford University School of Medicine

Jennifer (Jen) M. Mercado, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Jorge R. Mercado, Clinical Instructor. MD, Universidad de Guadalajara and Secretaria de Salud

Philip D. Mercado, Clinical Assistant Professor. MD, University of Wisconsin School of Medicine and Public Health

Sherri L. Merideth, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Tiffany Merrick-Mikhael, Clinical Assistant Professor. DO, Touro University College of Osteopathic Medicine-California

Monica Metzdorf, Clinical Associate Professor. MD, University of California, San Diego School of Medicine

Jeremy Mighdoll, Clinical Assistant Professor. MD, Albany Medical College

Fady N. Mikhael, Clinical Assistant Professor. DO, Lake Erie College of Osteopathic Medicine - Erie

Maged Mikhail, Clinical Instructor. MD, Ross University School of Medicine

Charles H. Miller, Clinical Instructor. MD, University of Wisconsin School of Medicine and Public Health

Scott Miller, Clinical Instructor. MD, Tufts University School of Medicine

Sean R. Miller, Clinical Instructor, MD, Creighton University School of Medicine

William P. Miller, Clinical Instructor. MD, University of Kentucky College of Medicine

Myo Min, Member of the Faculty. MD, Institute of Medicine 2

Stuart Y. Min, Clinical Instructor. MD, University of Pittsburgh School of Medicine

Lourdes P. Minaya, Clinical Assistant Professor. MD, Eastern Virginia Medical School at Old Dominion University

Julia S. Minocha, Clinical Instructor. MD, Northwestern University Feinberg School of Medicine

Hossein S. Mirheydar, Clinical Assistant Professor. MD, University of Minnesota Medical School

Sunit D. Mistry, Clinical Instructor. MD, University of California, Davis School of Medicine

Keyon Mitchell, Clinical Instructor. MD, University of California, Davis School of Medicine; MSW, University of Southern California

Maya Mitchell, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Rasham Mittal, Clinical Instructor. MD, GGS Medical College

Justin N. Miyamoto, Assistant Professor. MD, University of California, San Francisco School of Medicine

Kent Miyamoto, Assistant Professor. MD, University of California, Irvine School of Medicine

Heidi Mock, Adjunct Instructor. MD, Sidney Kimmel Medical College at Thomas Jefferson University; MPH, Emory University

Bobeck (Bob) Modjtahedi, Associate Professor. MD, University of California, Davis School of Medicine

Kiyarash Mohajer, Clinical Assistant Professor. MD, Shahid Beheshti University of Medical Sciences

Amir Mohamed, Clinical Instructor. MD, Rush Medical College of Rush University Medical Center

Sushant Mohleji, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Diana J. Moke, Clinical Associate Professor. MD, The Warren Alpert Medical School of Brown University; MS, University of Southern California

Suzanne (Suzy) Mokhtari, Clinical Assistant Professor. MD, Ross University School of Medicine; MPH, University of Southern California

Venkat S. Mokkapati, Clinical Instructor. MD, Drexel University College of Medicine

Naheed H. Momand, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Kanokporn Mongkolrattanothai, Member of the Faculty. MD, Chulalongkorn University School of Medicine

Davis Montalvan, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Lisa Montes, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Marie Montoya, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

John I. Monu, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science; MPH, University of Washington

Hannah B. Moon, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Jina Moon, Clinical Instructor. MD, Boonshoft School of Medicine Wright State University
Michael Sung Moon, Clinical Instructor. MD, New York University Grossman School of Medicine
Glen M. Moore, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine
Mike Moradian, Clinical Associate Professor. PhD, University of California, Los Angeles (UCLA); MS,
University of California, Los Angeles

Jaime B. Moran, Instructor. MD, Keck School of Medicine of the University of Southern California
Luis M. Moreta-Sainz, Clinical Instructor. MD, Instituto Tecnologico de Santo Domingo (INTEC)
Atef S. Morkos, Clinical Associate Professor. MD, Ain Shams University School of Medicine
Carl G. Morris, Clinical Professor. MD, Harvard Medical School

Michael E. Morris, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Nicole Morris, Assistant Professor, MD, University of California, San Francisco School of Medicine

Delmore J. Morsette, Clinical Instructor. MD, Finch University of Health Sciences Chicago Medical School; MS, University of California, Riverside; MS, Finch University of Health Sciences

Gino Mortillaro, Adjunct Assistant Professor. MD, Tulane University School of Medicine

Babak Morvarid, Clinical Assistant Professor. MD, Georgetown University School of Medicine

Margaret C. Mou, Clinical Assistant Professor. DO, Kansas City University - Kansas City

Natalie Mourra, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Bahar Moussavian, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Stephen Moy, Clinical Instructor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Lisa A. Mueller, Clinical Associate Professor. MD, The Ohio State University College of Medicine

Michael J. Muellner, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Sawrav J. Mukherjee, Clinical Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Michael Muljana, Clinical Assistant Professor. MD, Universidad Autonoma de Guadalajara Facultad de Medicine

Edward (Ed) C. Mun, Clinical Assistant Professor. MD, Harvard Medical School

David E. Muñoz, Clinical Assistant Professor. MD, Harvard Medical School

Meenakshi (Meena) Munshi, Clinical Assistant Professor. MD, St George's University, School of Medicine

Jessica A. Murphy, Clinical Associate Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Tikvah M. Myers, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

James Mykytenko, Clinical Assistant Professor. MD, State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine

Jason D. Nacorda, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Nur-Ain Nadir, Clinical Associate Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science; MEHP, Johns Hopkins University

Monica Naguib, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

Tej K. Naik, Clinical Assistant Professor. MD, St George's University, School of Medicine

Kathy Jean Nakano, Member of the Faculty. MD, University of Hawai'l John A. Burns School of Medicine

Joshua D. Napial, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Syed A. Naqvi, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MS, University of California, Irvine

Kavitha Narra, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Natalie Nasser, Clinical Assistant Professor. MD, Tufts University School of Medicine

Pouneh Nasseri, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Sathyabama (Sathima) Natarajan, Clinical Assistant Professor. MD, Madras Medical College

Christine E. Navarro, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Ronald A. Navarro, Professor. MD, University of Illinois College of Medicine

Mohammad (Mo) Nazari, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Elezer A. Negus, Clinical Assistant Professor. MD, University of Michigan Medical School

Casey Nelson, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Daniel W. Nelson, Clinical Associate Professor. DO, Des Moines University College of Osteopathic Medicine

Shanaeya N. Nelson, Clinical Assistant Professor. MD, University of Nebraska College of Medicine

Carrie Nelson-Vasquez, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Noel Nepomuceno, Clinical Assistant Professor. MD, Loma Linda University School of Medicine Catherine M. Newton, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Jonathan R. Neyer, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Igor Neyman, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Stanley W. Ng, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Andrew C. Nguyen, Clinical Assistant Professor. DO, Des Moines University College of Osteopathic Medicine

Andrew H. Nguyen, Clinical Associate Professor. DO, Des Moines University College of Osteopathic Medicine

Brian-Linh Nguyen, Assistant Professor. MD, David Geffen School of Medicine at UCLA; MTOM, Emperor's College

Carolyn V. Nguyen, Clinical Assistant Professor. MD, Vanderbilt University School of Medicine
Diana Nguyen, Clinical Instructor. MD, University of California, San Diego School of Medicine
Dung Anh Nguyen, Clinical Instructor. MD, University of Nebraska College of Medicine
Harrison B. Nguyen, Clinical Assistant Professor. MD, Texas A&M University College of Medicine
Huyen T. Nguyen, Clinical Instructor. MD, University of California, Irvine School of Medicine
Jasmine Nguyen, Member of the Faculty. MD, Rush Medical College of Rush University Medical
Center

Jennifer L. Nguyen, Assistant Professor. MD, Virginia Commonwealth University School of Medicine John D. Nguyen, Member of the Faculty. MD, University of Maryland School of Medicine Khang Nguyen, Clinical Associate Professor. MD, University of California, Davis School of Medicine Khoa A. Nguyen, Clinical Instructor. MD, University of California, Riverside School of Medicine Khoa D. Nguyen, Clinical Instructor. MD, Northeast Ohio Medical University College of Medicine Monika Dao Nguyen, Clinical Assistant Professor. MD, Virginia Commonwealth University School of Medicine

Nathan K. Nguyen, Clinical Assistant Professor. MD, State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine

Nicholas V. Nguyen, Clinical Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Que P. Nguyen, Clinical Instructor. MD, Medical College of Pennsylvania

Thien H. Nguyen, Clinical Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Tina A. Nguyen, Clinical Assistant Professor. MD, State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine

Tony H. Nguyen, Clinical Assistant Professor. MD, Virginia Commonwealth University School of Medicine

Trevor D. Nguyen, Clinical Instructor. DO, Midwestern University Arizona College of Osteopathic Medicine

Trieu Nguyen, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Von Ta Nguyen, Clinical Assistant Professor. MD, Virginia Commonwealth University School of Medicine

Danny Nhan, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Julie Nissim, Clinical Assistant Professor. DO, New York College of Osteopathic Medicine

Catherine K. Nobel, Clinical Instructor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Hiroki R. Noda, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Steven Nomura, Clinical Instructor. MD, Loyola University Chicago Stritch School of Medicine

Sara Noroozkhani, Clinical Assistant Professor. MD, New York Medical College

Le Notarfrancesco, Clinical Assistant Professor. MD, Penn State College of Medicine

Saba Notghi, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Erik B. Nuckols, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Eva W. Nyaggah, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Victoria V. O'Connor, Clinical Assistant Professor. MD, University of Texas Medical Branch John Sealy School of Medicine

Andrew J. Obara, Clinical Assistant Professor. MD, Uniformed Services University of the Health Sciences, F. Edward Hébert School of Medicine

Daniel M. Oh, Clinical Instructor. MD, Rutgers New Jersey Medical School

Marisa D. Oh, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Ajay Ohri, Clinical Instructor. MD, St. George's University School of Medicine

Kanu Okike, Clinical Associate Professor. MD, Harvard Medical School; MPH, Harvard University

Sharon K. Okonkwo-Holmes, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Amarachi Okoro, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA; MPH, University of California, Los Angeles

Ayodeji (Deji) G. Okusanya, Clinical Assistant Professor. MD, Ross University School of Medicine Ijeoma Okwandu, Clinical Assistant Professor. MD, Northwestern University Feinberg School of

Medicine

Lucía S. Olarte, Clinical Assistant Professor. MD, Rutgers New Jersey Medical School

Rosalynne (Rosie) Olshansky, Clinical Assistant Professor. MD, Vanderbilt University School of Medicine

Jasmine Omrani, Member of the Faculty. DO, Touro University College of Osteopathic Medicine-California

Erwin S. Ong, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Angeline Ong-Su, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Pedro Ontiveros, Clinical Instructor. MD, University of Illinois College of Medicine

Derek J. Orejel, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Dikran Orfali, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Christina S. Ortega-Chen, Clinical Instructor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine; MPH, University of Texas at Houston

Jonathan H. Osgood, Clinical Assistant Professor. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Cynthia (Cindy) Osmanian, Clinical Assistant Professor. MD, Stanford University School of Medicine

Carolyn M. Overman, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Christopher M. Owen, Clinical Instructor. MD, State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine

Renius Owen, Clinical Assistant Professor. PhD, University of Florida, Center for Mammalian Genetics

Jacqueline G. Pachon, Clinical Instructor. MD, Yale School of Medicine

Abbas (Abbie) Padeganeh, Clinical Assistant Professor. PhD, University of Montreal Faculty of Medicine; MS, Tarbiat Modares University

Charles Mark Page, Clinical Assistant Professor. MD, University of Michigan Medical School; MPH, University of Minnesota

Elian Paiuk, Clinical Assistant Professor. MD, Baylor College of Medicine School of Medicine

Mihwa C. Pak, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Rani Pallegadda, Assistant Professor. MD, University of Maryland School of Medicine; MPH, Johns Hopkins University

Karina Pambukhchian, Clinical Assistant Professor. MD, Kaunas University of Medicine

Vijayamalini Pampati, Clinical Instructor. DO, Michigan State University College of Osteopathic Medicine

Elaine Pan, Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Utsav Pandey, Clinical Assistant Professor. PhD, Penn State University

Bhanu Pandiri, Clinical Instructor. MD, Indira Gandhi Government Medical College

Jonathan K. Pang, Clinical Instructor. MD, Jacobs School of Medicine and Biomedical Sciences at the University at Buffalo

Lisa Paquette, Member of the Faculty. MD, Keck School of Medicine of the University of Southern California

Ashish Parekh, Clinical Assistant Professor. MD, Albany Medical College

Reshma Parikh, Clinical Assistant Professor. MD, Mumbai University Grant Medical College

Sunita Y. Parikh, Clinical Assistant Professor. MD, Government Medical College

Annie Park, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Christine L. Park, Member of the Faculty. MD, David Geffen School of Medicine at UCLA; MPH, University of California, Los Angeles

Daniel H. Park, Clinical Instructor, MD, Drexel University College of Medicine

John Park, Instructor. MD, David Geffen School of Medicine at UCLA

Joon S. Park, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Julie H. Park, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Mihee Park, Instructor. MD, The Ohio State University College of Medicine

Min Jung (Min) Park, Clinical Associate Professor. MD, The Warren Alpert Medical School of Brown University; MMSc, Brown University

Raymond Park, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Yung-Mee Park, Clinical Assistant Professor. MD, SUNY Downstate Health Sciences University College of Medicine

James (Randy) R. Parks, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Karmen A. Parks, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

David C. Parra, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Kristin R. Parrinella, Clinical Instructor. MD, University of California, San Diego School of Medicine Catherine Parsekian, Adjunct Lecturer. MPAP, Chapman University

Rohit Passi, Clinical Assistant Professor. MD, Pt B.D.Sharma Post Graduate Institute of Medical Sciences

Avni D. Patel, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Darpan Patel, Clinical Assistant Professor. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Deena Patel, Clinical Assistant Professor. DO, A.T. Still University Kirksville College of Osteopathic Medicine

Hemesh Patel, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MS, Georgetown University

Jaymica Patel, Clinical Instructor. MD, St George's University, School of Medicine (SGU SOM); MPH, St. George's University

Kaushal (Kevin) Patel, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA

Nilesh (Neil) J. Patel, Assistant Professor. MD, Saint Louis University School of Medicine

Niva Patel, Clinical Assistant Professor. MD, Ross University School of Medicine

Sunal S. Patel, Clinical Assistant Professor. MD, Albany Medical College

Neil E. Paterson, Clinical Assistant Professor. MD, University of Aberdeen School of Medicine and Dentistry; PhD, University of Dundee

Neelam Pathikonda, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Rene Patino, Clinical Instructor. MD, University of California, Irvine School of Medicine

Diana L. Patton, Clinical Assistant Professor. MD, Northeast Ohio Medical University College of Medicine

Candace Pau, Associate Professor. MD, Stanford University School of Medicine

Elizabeth (Liz) Walton-Paxton, Clinical Associate Professor. PhD, University of Gothenburg; MA, Northcentral University; MA, San Diego State University

Jessica E. Paz, Clinical Assistant Professor. MD, University of California, Davis School of Medicine; MS, University of California, Los Angeles

Megan Pearson-Cody, Clinical Instructor. DO, Midwestern University Chicago College of Osteopathic Medicine

Mishka S. Peart, Clinical Instructor. MD, University of Miami Leonard M. Miller School of Medicine; MPH, University of North Carolina

Brenda E. Pelayo, Clinical Instructor. MD, Meharry Medical College School of Medicine

Radha Pema, Clinical Assistant Professor. MD, Medical College of Wisconsin

Lauren Peng, Clinical Assistant Professor. MD, Peking University Health Center; MSc, University of Rochester

Kristine Penner-Klein, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley; MS, University of California, Berkeley

Edwin Peres Da Silva, Clinical Instructor. MD, St. John's Medical College

Aide Perez, Clinical Assistant Professor. MD, University of Illinois College of Medicine

Amanda Perez, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Jeanette P. Perez, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Susan A. Perez , Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Adam Perry, Clinical Assistant Professor. MD, Uniformed Services University of the Health Sciences, F. Edward Hébert School of Medicine

Alix E. Perry, Clinical Assistant Professor. MD, Geisel School of Medicine at Dartmouth

Shanon T. Peter, Clinical Assistant Professor. MD, Rutgers, Robert Wood Johnson Medical School

Kimberly (Kim) C. Peterson, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Mahnaz Pezeshpour, Member of the Faculty. MD, Islamic Azad University, Tehran Faculty of Medicine

Anh T. Pham, Clinical Assistant Professor. MD, Harvard Medical School

Ann P. Pham, Clinical Instructor. MD, University of California, San Francisco School of Medicine

Anna Pham, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Henry D. Pham, Clinical Associate Professor. MD, University of California, Davis School of Medicine

Hung T. Pham, Clinical Instructor. MD, Drexel University College of Medicine

Ly-Elaine (Ly) Pham, Clinical Assistant Professor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Duy Phan, Clinical Assistant Professor. MD, Virginia Commonwealth University School of Medicine

Mimi Yun Phan, Clinical Assistant Professor. MD, Drexel University College of Medicine

Philip Phan, Clinical Assistant Professor. MD, University of Pittsburgh School of Medicine

Sherese M. Phillips, Clinical Assistant Professor. MD, University of Maryland School of Medicine

Celyne T. Phung, Clinical Instructor. MD, Ross University School of Medicine

Emile C. Pinera, Clinical Assistant Professor. MD, St George's University, School of Medicine

Rebecca Pinnelas, Clinical Instructor. MD, Rutgers New Jersey Medical School

Matthew R. Pirnazar, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Charles R. Plehn, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Kimberlee T. Ployngam, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Melissa Poh, Clinical Associate Professor. MD, Georgetown University School of Medicine

Nicole Pope, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Amelia J. Poquette, Clinical Assistant Professor. MD, University of Miami Leonard M. Miller School of Medicine; MPH, University of Miami

Amy Porter, Assistant Professor. MD, New York University Grossman School of Medicine

Sonja Potrebic, Clinical Associate Professor. MD, Harvard Medical School; PhD, Harvard University

Keysha S. Pourhosseini, Clinical Instructor. DO, Touro University Nevada College of Osteopathic Medicine

Allen Shmoel Pourmoussa, Clinical Instructor. MD, St George's University, School of Medicine; MS, Barry University

Andrew M. Pourmoussa, Clinical Assistant Professor. MD, St. George's University, School of Medicine

Kimberly M. Preciado, Clinical Assistant Professor. MD, Rush Medical College of Rush University Medical Center

Jateen Prema, Clinical Assistant Professor. MD, Tufts University School of Medicine

Gale T. Prentiss, Clinical Associate Professor. MD, University of Hawai'l John A. Burns School of Medicine

Chileshe Nkonde Price, Associate Professor. MD, Medicine University College London; MS, University of Pennsylvania; MA, University of Cambridge, Trinity Hall

Lestina C. Price, Clinical Assistant Professor. MD, University of Pittsburgh School of Medicine; MPH, University of Pittsburgh

Erika Priestley, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Michael S. Provenghi, Clinical Instructor. MD, New York Medical College

Gabriella C. Puente, Clinical Instructor. MD, Columbia University Vagelos College of Physicians and Surgeons

Priti Pun, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Heena M. Purswani, Member of the Faculty. MD, Yeshiva University, Albert Einstein College of Medicine

Pradeep Putlur, Clinical Instructor. MD, Gandhi Medical College

Nataliya Pyatka, Clinical Assistant Professor. MD, Boonshoft School of Medicine Wright State University

Emmeline S. Qin, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Chunyuan Qiu, Clinical Professor. MD, Henan Medical University; MS, Medical School of Beijing University; MS, University of Washington

Henry Quach, Member of the Faculty. MD, Vanderbilt University School of Medicine

Maureen F. Quan, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Melissa Quan, Clinical Instructor. DO, Michigan State University College of Osteopathic Medicine

Cara L. Quant, Clinical Instructor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Monica Quezada, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Edward Quiming, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA

Maria Michelle (Michelle) S. Quiogue, Clinical Assistant Professor. MD, The Warren Alpert Medical School of Brown University

Mitchell M. Rabbi, Clinical Assistant Professor. MD, SUNY Downstate Health Sciences University College of Medicine

Alireza Radmanesh, Clinical Associate Professor. MD, Tehran University of Medical Sciences Gary W. Radner, Clinical Instructor. MD, Rush Medical College of Rush University Medical Center Cinderella C. Radu, Clinical Instructor. MD, University of the Philippines College of Medicine

Nastaran Rafiei, Clinical Instructor. MD, Tehran University of Medical Sciences,

Asif Rahman, Clinical Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences

Sudhir S. Rajan, Clinical Assistant Professor. MD, Ross University School of Medicine

Anusha Ramanathan, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Jorge Ramirez, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Ruan T. Ramjit, Clinical Associate Professor. MD, USF Health Morsani College of Medicine

Sunil Ramnani, Clinical Instructor. MD, Jawaharlal Nehru Medical College

Orlando Xavier Ramos, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

Jamal S. Rana, Member of the Faculty. MD, The Aga Khan University; PhD, University of Amsterdam

Jeegar R. Rana, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California; MHA, University of Southern California

Richie K. Rana, Clinical Instructor. MD, Drexel University College of Medicine

Ethan B. Rand, Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Ruvdeep (Happy) S. Randhawa, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Amanjot K. Rangi, Clinical Assistant Professor. MD, Bharati Vidyapeeth Medical College

Scott Rasgon, Associate Professor. MD, Keck School of Medicine of the University of Southern California

Zakiyyah J. Rasheed, Clinical Assistant Professor. DO, Philadelphia College of Osteopathic Medicine

Joseph J. Ravera, Clinical Associate Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Anupriya Razdan, Clinical Assistant Professor. MD, Government Medical College, Jammu

Rabia Rafi Razi, Assistant Professor. MD, Johns Hopkins University School of Medicine; MPH, University of Pittsburgh

Harini Reddy, Clinical Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Kuruganti A. Reddy, Clinical Assistant Professor. MD, Slaska Akademia Medyczna

Nirupa (Rupa) Reddy, Clinical Assistant Professor. MD, Albany Medical College

Daniel W. Ree, Clinical Instructor. MD, Tulane University School of Medicine; MPH, Tulane University

Samantha A. Reed, Clinical Instructor, MD, David Geffen School of Medicine at UCLA

Adam Rees, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Galya Rees, Clinical Instructor. MD, David Geffen School of Medicine at UCLA; MS, University of California, Los Angeles

Jonathan S. Rees, Clinical Instructor. MD, University of Connecticut School of Medicine

Susan Reines, Clinical Associate Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Aaron J. Reitman, Clinical Assistant Professor. DO, Midwestern University Chicago College of Osteopathic Medicine

Nima Rejali, Clinical Instructor. DO, Touro College of Osteopathic Medicine

Myunghi (Jamie) M. Renslo, Clinical Assistant Professor. MD, Medical College of Virginia; MS, College of William and Mary

Alex M. Resnick, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

R. Luke Rettig, Member of the Faculty. MD, George Washington University School of Medicine and Health Sciences

Polina Reyblat, Clinical Professor. MD, Keck School of Medicine of the University of Southern California

Liliana Reynoso, Clinical Assistant Professor. MD, Stanford University School of Medicine

Kambiz Rezaie, Clinical Assistant Professor. MD, Medical College of Wisconsin

Aurore Richard, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Gunter Rieg, Clinical Associate Professor. MD, Johann Wolfgang Goethe-University

David Rios, Clinical Instructor. MD, University of California, Irvine School of Medicine

Michelle Fabiola Rios, Assistant Professor. MD, University of California, San Francisco School of Medicine

Kambria K. Ripp, Clinical Instructor. MD, University of California, Irvine School of Medicine

Malihe Rivaz, Clinical Instructor. MD, Shiraz University of Medical Sciences

Gerin F. River, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Luis F. Rivera Melara, Clinical Assistant Professor. MD, Universidad Nacional Autonoma de Honduras

Alexander Rivero, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Syed T. Rizvi, Clinical Assistant Professor. MD, Dow Medical College

Paul M. Robb, Clinical Assistant Professor. MD, Ross University School of Medicine

Dustin E. Robinson, Clinical Assistant Professor. MD, American University of the Caribbean School of Medicine

Freesia Robinson, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Keith D. Roby, Clinical Instructor. MD, University of California, San Diego School of Medicine

Gilbert C. Roc, Clinical Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences

Damien C. Rodger, Clinical Professor. MD, Keck School of Medicine of the University of Southern California; PhD, California Institute of Technology

Janelle Rodriguez, Instructor. MD, David Geffen School of Medicine at UCLA; MS, University of Southern California; MPH, University of California, Los Angeles

Noah Rodriguez, Clinical Associate Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine

Osvaldo Rodriguez, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Paola G. Rodriguez, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Maricela Rodriguez-Gutierrez, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Hilary A. Roeder, Clinical Assistant Professor. MD, University of Michigan Medical School; MAS, University of California, San Diego

Brian F. Roehmholdt, Assistant Professor. MD, Keck School of Medicine of the University of Southern California; PhD, University of Southern California

Rana Rofagha Sajjadian, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Jake Rofman, Clinical Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Sara Romani, Clinical Instructor. MD, University of California, Riverside School of Medicine

Brian K. Romias, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Gabriel Rose, Clinical Assistant Professor. DO, New York College of Osteopathic Medicine

Ruth Rosen, Member of the Faculty. MD, Technion Israel Institute of Technology Ruth and Bruce Rappaport Faculty of Medicine

Elan Rosenthal, Clinical Instructor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Kimberly Ross, Clinical Instructor. MD, University of Miami Leonard M. Miller School of Medicine; MBA, University of Miami

Casey L. Rosser, Clinical Instructor. MD, University of Arizona College of Medicine - Phoenix

Nareg H. Roubinian, Professor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont; MPHTM, Tulane University

Nicholas W. Roueiheb, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MPH, California State University, Northridge

Lisa P. Roy, Clinical Assistant Professor. MD, Yale School of Medicine

Rebecca (Beckie) L. Roy, Clinical Assistant Professor. MD, University of Texas Southwestern Medical School; MPH, University of California, Berkeley

Joseph H. Ruan, Clinical Assistant Professor. MD, Drexel University College of Medicine

Marc K. Rubenzik, Clinical Instructor. MD, University of Arizona College of Medicine - Tucson; PhD, University of Arizona - Tucson

Aaron L. Rubin, Clinical Associate Professor. MD, Texas Tech University Health Sciences Center School of Medicine

Derek G. Rudge, Clinical Assistant Professor. MD, Rutgers, Robert Wood Johnson Medical School

Wendy Ruggeri, Adjunct Assistant Professor. MD, David Geffen School of Medicine at UCLA

Steven Russak, Clinical Associate Professor. MD, University of California, San Francisco School of Medicine

Matthew Russell, Clinical Instructor. MD, University of California, San Diego School of Medicine

Anne M. Rutkowski, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

Marianne K. Ryan, Clinical Assistant Professor. MD, University of Washington School of Medicine

Randall (Randy) Ryan, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Kristopher G. Sabb, Clinical Assistant Professor. MD, University of North Dakota School of Medicine and Health Sciences

Peter Sacci, Clinical Instructor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Brent A. Safran, Clinical Assistant Professor. MD, Sackler School of Medicine / New York State-American Program Tel Aviv University

Neeta C. Saheba, Clinical Assistant Professor. MD, Grant Medical School

Amandeep Sahota, Clinical Professor. MD, Government Medical College, Amritsar; MS, University of Southern California

Abdullah Saidy, Clinical Instructor. MD, St George's University, School of Medicine
Maryam N. Saidy, Clinical Instructor. MD, St George's University, School of Medicine
Apameh Salari, Clinical Instructor. MD, Shahid Beheshti University of Medical Sciences
Morris Salem, Clinical Associate Professor. MD, Saint Louis University School of Medicine
Zena S. Salim, Clinical Instructor. MD, Michigan State University College of Human Medicine
Robert E. Sallis, Clinical Professor. MD, Texas A&M University College of Medicine
Jaroslava Salman, Clinical Associate Professor. MD, University of P.J. Safarik
Ihor Salo, Clinical Assistant Professor. MD, Danylo Halytsky Lviv State Medical University
Miriam A. Salvador, Clinical Instructor. MD, Universidad Autonoma de Guadalajara Facultad de
Medicine

Mark B. Salzman, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai Danny Sam, Associate Professor. MD, Howard University College of Medicine

Raymond A. Samatovicz, Clinical Assistant Professor. MD, Rutgers, Robert Wood Johnson Medical School

Marcelo Santos Sampaio, Clinical Associate Professor. MD, State University of Rio de Janeiro School of Medical Sciences; MS, State University of Rio de Janeiro; PhD, Federal University of Rio de Janeiro

Mary Jane San Antonio, Clinical Assistant Professor. MD, Far Eastern University NRMF Institute of Medicine

Daniel Sanchez, Clinical Assistant Professor. MD, Stanford University School of Medicine

Felipe A. Sanchez, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA; MBA, University of California, Los Angeles

Norma Sanchez, Clinical Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine; MPH, University of California, Los Angeles

Lisa M. Sanders, Clinical Assistant Professor. MD, Tulane University School of Medicine

Sumeet S. Sandhu, Clinical Instructor. DO, Ohio University Heritage College of Osteopathic Medicine in Cleveland

Carlos Sandoval, Clinical Instructor. MD, David Geffen School of Medicine at UCLA; MBA, University of California, Los Angeles

Eric Sandoval, Clinical Instructor. MD, University of California, Irvine School of Medicine

Navdeep (Navi) Sangha, Clinical Associate Professor. MD, Punjab University Dayanand Medical College

Stephen L. Sanoja, Clinical Assistant Professor. MD, Tufts University School of Medicine

Ana D. Saravia, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA; MPH, University of California, Los Angeles

Dean Sarco, Clinical Associate Professor. MD, University of California, San Francisco School of Medicine

Grant G. Sarkisyan, Clinical Assistant Professor. MD, Yerevan State Medical University

Taraneh Sarlati, Clinical Instructor. MD, Tehran University of Medical Sciences

Allison M. Sarmiento, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Suleiman Saroia, Clinical Assistant Professor. DO, Touro University College of Osteopathic Medicine-California

Vikas Satyananda, Clinical Assistant Professor. MD, St. John's Medical College

Sapna Satyanarayan-Victor, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine

Aye M. Saw, Clinical Assistant Professor. MD, University of Medicine 2

Angel H. Schaffer, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Eric E. Schallert, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Kai G. Schlingmann, Clinical Assistant Professor. DO, Lake Erie College of Osteopathic Medicine - Erie

Lindsay M. Schmid-Fertig, Clinical Instructor. MD, St. George's University, School of Medicine

Danielle I. Schneider Williams, Clinical Assistant Professor. MD, Albany Medical College

Lucy P. Schram, Clinical Assistant Professor. MD, University of Texas Medical Branch John Sealy School of Medicine

Adam Schwartz, Clinical Associate Professor. MD, Albany Medical College; MS, Dartmouth College

Michael A. Schwartz, Member of the Faculty. MD, Northwestern University Feinberg School of Medicine

Michael Schwartzwald, Clinical Assistant Professor. MD, St George's University, School of Medicine (SGU SOM)

Marla E. Scott, Clinical Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences

Thomas C. (T.C.) Scotton, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Ashkan E. Sefaradi, Clinical Assistant Professor. MD, University of Wisconsin School of Medicine and Public Health

Ashish Sehgal, Clinical Assistant Professor. MD, Saint Louis University School of Medicine; MBA, Pepperdine University

Indu Sehgal, Clinical Instructor. MD, Bangalore University

Sonia Sehgal, Clinical Assistant Professor. MD, Ross University School of Medicine

Michael Seider, Clinical Associate Professor. MD, University of Miami Leonard M. Miller School of Medicine

Todd Seigel, Clinical Assistant Professor. MD, University of Minnesota Medical School

Harpreet Sekhon, Clinical Associate Professor. MD, Government Medical College, Amritsar

Marshall J. Seligmann, Clinical Assistant Professor. MD, SUNY Downstate Health Sciences University College of Medicine

Stanley Setiawan, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Matt Sexter, Adjunct Assistant Professor. MD, Tulane University School of Medicine

Adel M. Shabani, Member of the Faculty. MD, Ross University School of Medicine

Ramin Shadman, Clinical Associate Professor. MD, University of California, San Diego School of Medicine

Hedyeh (Heidi) Shafi, Clinical Assistant Professor. MD, Georgetown University School of Medicine

Ahmed I. Shah, Clinical Associate Professor. MD, Allama Igbal Medical College

Birju Shah, Clinical Instructor. MD, Baroda Medical College

Gaurang Shah, Clinical Associate Professor. MD, Smt. NHL Municipal Medical College; MS, Gujarat University

Jay P. Shah, Clinical Associate Professor. MD, University of Cincinnati College of Medicine

Matin Shah, Clinical Assistant Professor. MD, Creighton University School of Medicine

Mayank P. Shah, Clinical Instructor. MD, Smt. NHL Municipal Medical College

Mona A. Shah, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Neil Shah, Clinical Instructor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine

Pranav Shah, Clinical Associate Professor. MD, Smt. NHL Municipal Medical College

Shaival Shah, Clinical Assistant Professor. MD, University of Illinois College of Medicine

Shakeela F. Shah, Clinical Assistant Professor. MD, Wayne State University School of Medicine

Sneha Shah, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MS, University of Southern California

Sunny R. Shah, Clinical Assistant Professor. MD, Ross University School of Medicine

Mohit M. Shahani, Member of the Faculty. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Melineh Shajanian, Clinical Assistant Professor, MD, St George's University, School of Medicine

Patricia S. Shakhshir, Adjunct Lecturer. PhD, Azusa Pacific University; MSN, California State University, Dominguez Hills

Dov Shalman, Clinical Assistant Professor. MD, Case Western Reserve University School of Medicine

Arlet Shamalian, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Hazim K. Shams, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Rajesh M. Shankar, Clinical Instructor. MD, Drexel University College of Medicine

Charles (Chuck) Shapiro, Associate Professor. MD, Stanford University School of Medicine

Safa Sharabi, Clinical Assistant Professor. MD, Baylor College of Medicine School of Medicine

Nima Sharif, Clinical Assistant Professor. MD, Ross University School of Medicine

Asha Sharma, Clinical Assistant Professor. MD, Punjab University Dayanand Medical College

Jasdeep (Jas) K. Sharma, Clinical Assistant Professor. MD, University of British Columbia Faculty of Medicine

Manisha Sharma, Clinical Assistant Professor. MD, University of Alabama at Birmingham Marnix E. Heersink School of Medicine

Morali D. Sharma, Clinical Professor. MD, University of Baroda; MS, Baroda Medical College

Rajeev Sharma, Clinical Instructor. MD, Our Lady of Fatima University College of Medicine

Vishakha M. Sharma, Clinical Instructor. MD, University of Alabama at Birmingham Marnix E. Heersink School of Medicine

Girqis Sharmoukh, Clinical Associate Professor. MD, Ain Shams University School of Medicine

Alia Shbeeb, Clinical Instructor. MD, University of California, Irvine School of Medicine

Victoria Sheen, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Albert Yuh-Jer Shen, Clinical Associate Professor. MD, China Medical University; MS, University of Southern California

Jason D. Shen, Clinical Instructor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont

Kai-Yi Shen, Clinical Instructor. MD, University of Texas Medical Branch John Sealy School of Medicine

Tim Ken Shen, Clinical Instructor. MD, The Ohio State University College of Medicine; MS, Tufts University

Manisha Shenava, Clinical Assistant Professor. MD, Medical University of Silesia School of Medicine Rana S. Shenoy, Clinical Assistant Professor. MD, Kasturba Medical College Shelley Shi, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Erin Shih, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Henry H. Shih, Clinical Instructor. MD, Tufts University School of Medicine

Julia Shih, Member of the Faculty. DO, Touro University Nevada College of Osteopathic Medicine

Stephen L. Shih, Clinical Assistant Professor. MD, Vanderbilt University School of Medicine

Sze-Wei T. Shimizu, Clinical Instructor. MD, Ross University School of Medicine

Linda W. Shiue, Clinical Associate Professor. MD, The Warren Alpert Medical School of Brown University

Tarannom Shoghi, Clinical Instructor. MD, Western Michigan University Homer Stryker M.D. School of Medicine

I-Hsiang Shu, Clinical Instructor. MD, Robert Larner, M.D. College of Medicine at the University of Vermont; MEng, Massachusetts Institute of Technology

May S. Shung, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Jeffrey D. Siegel, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Stella C. Sien, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Andrew Sierra, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

David J. Silberstein, Clinical Assistant Professor. MD, Howard University College of Medicine

Matthew A. Silver, Associate Professor, MD, Yeshiva University, Albert Einstein College of Medicine

Jill Silverman, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

John Sim, Clinical Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

David C. Simon, Clinical Instructor. MD, Yeshiva University, Albert Einstein College of Medicine

Mehran Sina, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Lizette C. Sistoza, Clinical Instructor. MD, University of Santo Tomas Faculty of Medicine and Surgery

Laura C. Skoczylas, Clinical Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University; MS, University of Pittsburgh

Seif Sleiman, Clinical Assistant Professor. MD, Lebanese University Faculty of Medical Sciences Isil Smith, Clinical Instructor. MD, Ondokuz Mayis Üniversitesi Tıp Fakültesi

Jennifer M. Smith, Clinical Assistant Professor. MD, Drexel University College of Medicine

Matthew P. Smith, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Carolyn Snarskis, Clinical Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences

David Sobel, Adjunct Lecturer. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley

Kyaw Khaing (Kyaw) Soe, Clinical Assistant Professor. MD, University of Medicine 1

Eugene Sohn, Clinical Associate Professor. MD, University of California, San Diego School of Medicine; MPH, University of California, Berkeley

Mehrzad (Michael) M. Soleimani, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Gina Soliman, Clinical Instructor. MD, University of Alexandria Faculty of Medicine

Caroline D. Solomon, Clinical Assistant Professor. MD, University of Washington School of Medicine

Shahram Soltanzadeh, Clinical Instructor. MD, Ross University School of Medicine

Margarita Somova, Clinical Assistant Professor. MD, Yaroslavl State Medical Academy

Albert M. Song, Clinical Assistant Professor. MD, Loyola University Chicago Stritch School of Medicine

Greg Song, Clinical Instructor. MD, Drexel University College of Medicine

Rubens J. Song, Clinical Assistant Professor. MD, Universidade de São Paulo Faculdade de Medicina

Silvia Song, Member of the Faculty. MD, University of California, San Diego School of Medicine

Zhigang Song, Clinical Assistant Professor. MD, Shandong Medical University; PhD, University of Southern California; MS, Shandong Medical University

Oladimeji (Terence) Sonuga, Clinical Assistant Professor. MD, Meharry Medical College School of Medicine

Margaret S. Soper, Clinical Instructor. MD, Harvard Medical School

James H. Spain Greene, Clinical Assistant Professor. MD, University of Missouri-Kansas City School of Medicine

Rachel M. Spencer, Clinical Instructor. MD, University of California, San Francisco School of Medicine; MS, University of California, Berkeley

Michelle L. Sperry, Clinical Assistant Professor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Nancy H. Spiegel, Lecturer. MA, University of Rochester

Ronald Spier, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Jared M. Spotkov, Clinical Instructor. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley

Shreyas Srinivas, Member of the Faculty. MD, St. George's University School of Medicine

Sena R. St John, Clinical Assistant Professor. DO, Michigan State University College of Osteopathic Medicine

Karla St.Germain, Clinical Assistant Professor. MD, Georgetown University School of Medicine

Helen S. Stafford, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Kristi A. Stanley, Member of the Faculty. MD, University of Nevada, Reno School of Medicine; MPH, University of Southern California

Libby S. Stein, Clinical Instructor. MD, Albany Medical College

David Stempel, Clinical Instructor. MD, David Geffen School of Medicine at UCLA; MBA, University of California, Los Angeles

Cydney C. Stewart, Clinical Assistant Professor. MD, University of New Mexico School of Medicine; MS, University of New Mexico

Sara T. Stewart, Clinical Assistant Professor. MD, Tufts University School of Medicine

Eric Stiner, Clinical Assistant Professor. MD, University of Washington School of Medicine

Margaret Stone, Assistant Professor. MD, David Geffen School of Medicine at UCLA

Nora Strick, Clinical Assistant Professor. MD, Medical College of Wisconsin

Nathan Stuempfig, Clinical Assistant Professor. DO, Midwestern University Chicago College of Osteopathic Medicine

Stefanie K. Sueda, Clinical Instructor. MD, Albany Medical College

Ravi W. Sumer, Clinical Assistant Professor. MD, Frank H. Netter MD School of Medicine at Quinnipiac University

Chien Sun, Clinical Instructor. MD, University of Arizona College of Medicine - Tucson

Tina Suneja, Clinical Assistant Professor. MD, University of Missouri-Kansas City School of Medicine

Han-Lin (Henry) H. Sung, Clinical Assistant Professor. MD, Ross University School of Medicine

Nancy M. Svitek, Clinical Assistant Professor. MD, Indiana University School of Medicine

David K. Swain, Clinical Assistant Professor, MD, New York Medical College

William Swanson, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Rajesh S. Swaroop, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

Sireena Sy, Clinical Instructor. MD, University of California, Riverside School of Medicine

Roman M. Sydorak, Clinical Professor. MD, Columbia University Vagelos College of Physicians and Surgeons; MPH, Columbia University

Tracey N. Sylvester, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Vajeeha Tabassum, Clinical Associate Professor. MD, Sri Devaraj Urs Medical College

Ramona Tabib, Clinical Instructor. MD, University of California, Davis School of Medicine

Kent Tadokoro, Clinical Instructor. MD, Medical College of Wisconsin

Kellie A. Tafet, Clinical Assistant Professor. MD, Jacobs School of Medicine and Biomedical Sciences at the University at Buffalo

Emelita B. Talag, Clinical Assistant Professor. MD, Far Eastern University NRMF Institute of Medicine

Shayandokht Taleb, Member of the Faculty. MD, Tehran University of Medical Sciences

Gim Tan, Assistant Professor. MD, National University of Singapore

Michael C. Tan, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Roland Tang, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Kevin Tangonan, Member of the Faculty. DO, Touro University College of Osteopathic Medicine-California

Michelle A. Tanzil, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Evan Taragano, Clinical Assistant Professor. MD, Jacobs School of Medicine and Biomedical Sciences at the University at Buffalo

Alison (Allie) S. Taur, Clinical Associate Professor. MD, University of Michigan Medical School

Joyce Wong Taur, Clinical Assistant Professor. MD, University of Michigan Medical School; MPH, University of Michigan

Majid Tayyarah, Clinical Assistant Professor. MD, New York University Grossman School of Medicine

Silena Te, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Tommy Tea, Clinical Assistant Professor. MD, University of Central Florida College of Medicine

David M. Tellalian, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Rene Tellez, Clinical Instructor. MD, Mayo Clinic Alix School of Medicine; MBA, Arizona State University

Nikhil Tendulkar, Clinical Instructor. MD, The Ohio State University College of Medicine

Christopher (Chris) F. Tenggardjaja, Clinical Associate Professor. MD, Northwestern University Feinberg School of Medicine

Linda Jennifer Tesoriero, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Deron J. Tessier, Clinical Associate Professor. MD, University of California, Irvine School of Medicine

Bensen Thai, Clinical Assistant Professor. MD, Tulane University School of Medicine

Michael Than, Clinical Instructor. MD, Loma Linda University School of Medicine

Alexander K. Thayer, Clinical Assistant Professor. MD, Indiana University School of Medicine

Robert M. Theal, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Salima Thobani, Clinical Assistant Professor. MD, St George's University, School of Medicine

Benjamin Thomas, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Charles S. Thomas, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Isac C. Thomas, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Natasha M. Thomas, Clinical Assistant Professor. MD, Medical University of Lublin

Sarah Thomas, Clinical Instructor. MD, University of Baghdad College of Medicine

Shawn Thomas, Clinical Instructor. MD, St George's University, School of Medicine (SGU SOM)

Nailah A. Thompson, Clinical Assistant Professor. DO, Kansas City University; MPH, Columbia University

Joseph M. Thorpe, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

Andy Tien, Clinical Instructor. MD, Eastern Virginia Medical School at Old Dominion University

Martin C. Tien, Clinical Assistant Professor. MD, New York Medical College

David Tieu, Clinical Associate Professor. MD, University of California, San Diego School of Medicine

Natasha Tilluckdharry, Clinical Associate Professor. MD, St George's University, School of Medicine

Matthew Stephen Tjajadi, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

lan R. Tofler, Clinical Assistant Professor. MD, University of Western Australia

Linda D. Tolbert, Assistant Professor. MD, Howard University College of Medicine; JD, Southwestern University School of Law; EdD, University of Southern California; MPH, University of California, Los Angeles

Lawrence R. Tom, Clinical Associate Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science; MS, Chicago Medical School

Thomas Y. Tom, Associate Professor. MD, University of California, Irvine School of Medicine

Eric Ton, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine Cathy Tong, Clinical Instructor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Garrison Tong, Clinical Instructor. MD, University of California, San Diego School of Medicine Daniel Tongbai, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA Fernando Torres, Clinical Instructor. MD, University of California, Irvine School of Medicine William (Bill) J. Towner, Professor. MD, Keck School of Medicine of the University of Southern California; MS, University of California, Los Angeles

Alysia L. Tran, Clinical Associate Professor. MD, David Geffen School of Medicine at UCLA An (Ann) H. Tran, Clinical Instructor. MD, Medical College of Wisconsin

Hung Tran, Clinical Assistant Professor. MD, University of Colorado School of Medicine
Kim-Huong Tran, Associate Professor. MD, Baylor College of Medicine School of Medicine
Levina Tran, Clinical Instructor. MD, University of California, Irvine School of Medicine
Loi Van Tran, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic
Medicine of the Pacific

Mike V. Tran, Clinical Assistant Professor. MD, New York Medical College

Thanh C. Tran, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Richard Treger, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Stephen (Steve) Treiman, Clinical Assistant Professor. MD, McGovern Medical School at The University of Texas Health Science Center at Houston

Christine Trinh, Clinical Instructor. MD, David Geffen School of Medicine at UCLA

Bradford Tropea, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Diane G. Truong, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Huy Truong, Clinical Assistant Professor. MD, University of Nevada, Reno School of Medicine

Linh N. Truong, Clinical Instructor. MD, University of California, Irvine School of Medicine

Bryon Tseng, Clinical Associate Professor. MD, University of Maryland School of Medicine

David Tsiang, Clinical Instructor. MD, University of Cincinnati College of Medicine

Erica (Tuki) Tukiainen MD, Clinical Instructor. MD, David Geffen School of Medicine at UCLA; MPH, University of California, Los Angeles

Dora T. Tung, Clinical Assistant Professor. MD, Finch University of Health Sciences

Jonathan D. Tung, Clinical Instructor. MD, University of California, San Diego School of Medicine

Stephen (Steve) Turay, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Scott S. Um, Clinical Assistant Professor. MD, Albany Medical College

Ricardo Uriostegui, Clinical Assistant Professor. MD, Universidad Autonoma de Guadalajara Facultad de Medicine

Cindy J. Uypitching, Clinical Instructor. MD, University of the East Ramon Magsaysay Memorial Medical Center

Shariece Marie Vallejo, Clinical Assistant Professor. DO, Midwestern University Arizona College of Osteopathic Medicine

Nicole Rae Van Buren, Clinical Instructor. MD, Georgetown University School of Medicine

Patrick Van Winkle, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Julio E. Vaquerano, Member of the Faculty. MD, Howard University College of Medicine

Matthew D. Varallo, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Amanda Vargas, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MS, University of Utah

Tara K. Vartanian, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Ebonie M. Vasquez, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Geogy Vatakencherry, Clinical Associate Professor. MD, University of Miami Leonard M. Miller School of Medicine

Christopher (Chris) M. Vaughn, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai

Jeffrey B. Velotta, Clinical Professor. MD, George Washington University School of Medicine and Health Sciences

Sunnyline P. Vendiola, Clinical Instructor. MD, University of the East Med Center

Cassie EA Ver Steeg, Clinical Assistant Professor. MD, University of New Mexico School of Medicine

Moin Vera, Clinical Associate Professor. MD, Drexel University College of Medicine; PhD, University of California, Los Angeles; MS, University of California, Los Angeles

Janice Verham, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Noel S. Victor, Clinical Assistant Professor. MD, Madras Medical College

Isaac H. Vielma, Clinical Associate Professor. MD, Loma Linda University School of Medicine

Sergio Viera, Clinical Assistant Professor. MD, New York Medical College

Niveditha (Neetha) Vilasagar, Instructor. MD, Marshall University Joan C. Edwards School of Medicine

Jannette Villalobos, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Tisha (Tish) Villanueva, Clinical Assistant Professor. MD, Albany Medical College; MS, Barry University

Natacha C. Villegas, Clinical Instructor. MD, McGovern Medical School at The University of Texas Health Science Center at Houston

Maria Fe B. Villosis, Clinical Assistant Professor. MD, University of Santo Tomas Faculty of Medicine and Surgery

Janice M. Vivaldi, Clinical Instructor. MD, Ponce Health Sciences University School of Medicine

Trung D. Vo, Clinical Assistant Professor. MD, University of California, San Francisco School of Medicine

Paul Vollucci, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Asit Vora, Clinical Assistant Professor. MD, University of South Carolina School of Medicine, Columbia

Reena K. Vora, Clinical Instructor. MD, Sardar Patel University Pramukh Swami Medical College

Nopawan (Bonnie) Vorasubin, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Brian T. Vovan, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Charles M. Vu, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Neil Vyas, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Ritambhara (Ritam) Wadhwa, Clinical Instructor. DO, Midwestern University Arizona College of Osteopathic Medicine

Shilpa Wali, Clinical Instructor. MD, St George's University, School of Medicine

Susan Walker, Member of the Faculty. MD, Tufts University School of Medicine

John K. Wall, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

William A. Wallace, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Amy K. Walston, Clinical Assistant Professor. MD, Medical College of Ohio

Allyson A. Wang, Clinical Assistant Professor. MD, Drexel University College of Medicine; MPH, Drexel University

Annie Wang, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

David C. Wang, Clinical Instructor. MD, Medical College of Wisconsin

Eugene Y. Wang, Clinical Assistant Professor. MD, Icahn School of Medicine at Mount Sinai

Jeffrey C. Wang, Member of the Faculty. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Jingtian Wang, Clinical Associate Professor. MD, First Military Medical University; PhD, Dalhousie University

Quincy Wang, Clinical Assistant Professor. MD, Drexel University College of Medicine

Regina Wang, Clinical Assistant Professor. MD, Wayne State University School of Medicine; MPH, Wayne State University

Steve W. Wang, Clinical Assistant Professor. MD, Rutgers New Jersey Medical School

Susan Wang, Clinical Associate Professor. MD, Drexel University College of Medicine

Ziqing (Z) Wang, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Brian N. Wardwell, Clinical Assistant Professor. MD, University of California, Davis School of Medicine

Olayinka Kenneth Warritay, Clinical Assistant Professor. MD, St George's University, School of Medicine (SGU SOM); MPH, Wayne State University

Chris P. Washington, Member of the Faculty. MD, University of California, Irvine School of Medicine

James Andrew Washington III, Clinical Assistant Professor. MD, Howard University College of Medicine

Colin Watanabe, Clinical Associate Professor. MD, University of California, San Francisco School of Medicine

Mika Watanabe, Clinical Instructor. MD, Case Western Reserve University School of Medicine; MPH, University of California, Los Angeles

Christopher (Chris) AJ Webb, Clinical Professor. MD, University of Wisconsin School of Medicine and Public Health

Jonathan Weber, Clinical Instructor. MD, Lewis Katz School of Medicine at Temple University

David Wee, Clinical Instructor. MD, University of Michigan Medical School; MHS, Johns Hopkins University

Kenneth Wei, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Trevor O. Wells, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Jon Wender, Clinical Assistant Professor. MD, Yeshiva University, Albert Einstein College of Medicine

Edan Wernik, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Todd A. Westra, Clinical Assistant Professor. MD, Loma Linda University School of Medicine; MA, Nameer Theological Seminary School of Psychology

Paul D. Weyker, Clinical Professor. MD, University of Wisconsin School of Medicine and Public Health

Calvin B. Wheeler, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Emily Whitcomb, Clinical Associate Professor. MD, Johns Hopkins University School of Medicine; MAS, University of California, San Diego

Brett White, Professor. MD, Keck School of Medicine of the University of Southern California

Cicely White, Clinical Assistant Professor. MD, University of Texas Medical Branch John Sealy School of Medicine

Carla V. Wicks, Clinical Assistant Professor. MD, Howard University College of Medicine

Aaron P. Wilcox, Clinical Assistant Professor. MD, The Ohio State University College of Medicine

Christi Wiley, Clinical Associate Professor. MD, Keck School of Medicine of the University of Southern California

Illya Wilkerson, Clinical Instructor. MD, University of North Carolina School of Medicine

Madalynne Wilkes-Grundy, Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Jarrett Gavin Williams, Clinical Assistant Professor. MD, Morehouse School of Medicine

Lindia J. Willies-Jacobo, Professor. MD, University of California, San Diego School of Medicine

Paul S. Willis, Clinical Instructor. MD, Oregon Health & Science University College of Medicine

Sean Patrick Wilson, Member of the Faculty. MD, Virginia Commonwealth University School of Medicine

Teshina Wilson, Clinical Assistant Professor. DO, New York College of Osteopathic Medicine

Hannah R. Wirth, Clinical Instructor. MD, Drexel University College of Medicine; MS, Drexel University

Colleen Wittenberg, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Scott C. Wojtowich, Clinical Instructor. DO, Des Moines University College of Osteopathic Medicine

Bradford (Brad) Wolfram, Clinical Assistant Professor. MD, Albany Medical College

Eric Wong, Clinical Instructor. DO, Lake Erie College of Osteopathic Medicine - Erie

Felicia K. Wong, Clinical Assistant Professor. MD, The Warren Alpert Medical School of Brown University

Hon Lim (Harry) Wong, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific; MPH, Walden University

Lawrence Wong, Clinical Instructor. MD, University of California, Davis School of Medicine

Rose Wong, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Valarie Y. Wong, Clinical Assistant Professor. MD, Baylor College of Medicine School of Medicine

Christopher Y. Woo, Clinical Assistant Professor. MD, Duke University School of Medicine; MS, Stanford University

Sunee S. Woo, Clinical Instructor. MD, New York Medical College

Wesley Woo, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California

William O. Woo, Clinical Assistant Professor. MD, Drexel University College of Medicine

Mark T. Wright, Clinical Associate Professor. MD, University of Alabama at Birmingham Marnix E. Heersink School of Medicine

Abel Wu, Clinical Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Bechien Wu, Professor. MD, New York University Grossman School of Medicine; MPH, Harvard University

David P. Wu, Clinical Assistant Professor. MD, University of California, San Diego School of Medicine

Dennis Y. Wu, Clinical Instructor. MD, University of Michigan Medical School

Hsuyuan (Howard) Wu, Clinical Assistant Professor. MD, University of Toledo College of Medicine and Life Sciences

Stefanie Wu, Clinical Instructor. MD, Jacobs School of Medicine and Biomedical Sciences at the University at Buffalo

Susana Wu, Clinical Assistant Professor. MD, Medical College of Wisconsin

Thomas Wu, Clinical Assistant Professor. MD, Tufts University School of Medicine; MS, University of California, San Diego

Erin Wycoff, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Frank Xu, Clinical Instructor. MD, University of North Carolina School of Medicine

Liwen Xu, Clinical Instructor. MD, Harvard Medical School; MPhil , University of Cambridge, Churchill College

Hui Xue, Clinical Assistant Professor. MD, Duke University School of Medicine; MMSc, Harvard Medical School

Wael N. Yacoub, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Jose A. Yakushi, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Tanya R. Yakushi, Clinical Assistant Professor. PhD, University of California, Los Angeles (UCLA)

Nader Yamin, Clinical Instructor. MD, George Washington University School of Medicine and Health Sciences

Nancy Yan, Clinical Instructor. DO, Touro University Nevada College of Osteopathic Medicine; MS, Columbia University

Aparche B. Yang, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Calvin H. Yang, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Charles H. Yang, Clinical Instructor. MD, Keck School of Medicine of the University of Southern California; PhD, Yale University

Jenny F. Yang, Clinical Assistant Professor. MD, New York Medical College

Justin S. Yang, Clinical Associate Professor. MD, Johns Hopkins University School of Medicine

Xing Yang, Clinical Assistant Professor. MD, Shanghai Medical University; PhD, Osaka University; MSPH, Meharry Medical College

Alice J. Yau, Clinical Assistant Professor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Mallika R. Yavatkar, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Garrett M. Yee, Clinical Assistant Professor. MD, Drexel University College of Medicine

Julie M. Yen, Clinical Instructor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania

Jane J. Yeo, Clinical Assistant Professor. MD, Keck School of Medicine of the University of Southern California

Louise Y. Yeung, Clinical Associate Professor. MD, Washington University in St. Louis School of Medicine

Jenny Yiee, Clinical Associate Professor. MD, Yale School of Medicine

Leah Yieh, Clinical Associate Professor. MD, The University of Texas Health Science Center at San Antonio Joe R. and Teresa Lozano Long School of Medicine; MPH, University of Texas at Houston

Amy X. Yin, Clinical Assistant Professor. MD, Northwestern University Feinberg School of Medicine

Ki-Young Yoo, Clinical Assistant Professor. MD, Harvard Medical School

Stephen Yoo, Clinical Assistant Professor. MD, Loma Linda University School of Medicine

Justin J. Yoshida, Clinical Instructor. MD, Michigan State University College of Human Medicine Joo-Yon J. Youn, Clinical Instructor. MD, University of California, San Francisco School of Medicine Tracey C. Young, Instructor. MD, George Washington University School of Medicine and Health Sciences

Denise Y. Yu, Clinical Instructor. MD, University of California, San Diego School of Medicine Hana Yu, Clinical Instructor. DO, Touro College of Osteopathic Medicine

Maureen S. Yu, Clinical Assistant Professor. MD, Eastern Virginia Medical School at Old Dominion University

Kenneth Yun, Clinical Instructor. DO, Touro University College of Osteopathic Medicine-California Michelle M. Yun, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Kam Zainabadi, Member of the Faculty. MD, University of California, Irvine School of Medicine Karine Zakarian, Clinical Assistant Professor. MD, Saint Louis University School of Medicine Katerina M. Zakka, Clinical Instructor. MD, American University of Beirut Faculty of Medicine James Zamora, Clinical Assistant Professor. MD, Rutgers, Robert Wood Johnson Medical School Ceyda Zarifi, Clinical Instructor. DO, Western University of Health Sciences College of Osteopathic Medicine of the Pacific

Yasaman Zarrabi, Clinical Associate Professor. DO, Rowan-Virtua School of Osteopathic Medicine Robert (Bob) Zeiger, Professor. MD, SUNY Downstate Health Sciences University College of Medicine; PhD, State University of New York Downstate

Jorge L. Zelada Getty, Clinical Assistant Professor. MD, Universidad Nacional de Asuncion Facultad de Ciencias Medicas

Sessunu Zemo, Clinical Instructor. MD, Baylor College of Medicine School of Medicine

Amy W. Zhai, Clinical Assistant Professor. MD, Vanderbilt University School of Medicine

Qiaohua (John) Zhang, Clinical Instructor. MD, Sidney Kimmel Medical College at Thomas Jefferson University

Qing-Meng (Meng) Zhang, Clinical Instructor. MD, Rush Medical College of Rush University Medical Center

Ying Tao (Jessie) Zhang, Clinical Assistant Professor. MD, George Washington University School of Medicine and Health Sciences

Zhou Zhang, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Ming Zhi, Clinical Instructor. MD, Harvard Medical School

Michael W. Zhou, Clinical Instructor. MD, Boonshoft School of Medicine Wright State University

Michael Zhou, Clinical Instructor. MD, Tufts University School of Medicine

Milena Zirovich, Clinical Assistant Professor. MD, McGovern Medical School at The University of Texas Health Science Center at Houston

Toska J. Zomorodian, Clinical Instructor. MD, The Warren Alpert Medical School of Brown University

Cynthia Zuniga, Clinical Assistant Professor. MD, David Geffen School of Medicine at UCLA

Health Systems Science

Devin M. Absher, Professor. PhD, Emory University

Annette L. Adams, Assistant Professor. PhD, University of Washington; MPH, Oregon Health & Science University; MA, Lewis and Clark College

John L. Adams, Professor. PhD, University of Minnesota; MS, University of Minnesota

Etsemaye P. Agonafer, Adjunct Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine; MPH, University of California, Los Angeles; MS, University of California, Los Angeles

Andrew P. Ambrosy, Associate Professor. MD, Northwestern University Feinberg School of Medicine

Jaejin An, Assistant Professor. PhD, University of Southern California

Lyndsay Avalos, Associate Professor. PhD, University of California, Berkeley; MPH, Boston University

Andy Avins, Professor. MD, University of California, Irvine School of Medicine; MPH, Harvard University

Yohanna Barth-Rogers, Adjunct Assistant Professor. MD, Ben-Gurion University of The Negev/Columbia University

Sam Behseta, Professor. PhD, Carnegie Mellon University; MS, San Diego State University

Ankeet S. Bhatt, Assistant Professor. MD, University of Connecticut School of Medicine; MBA, University of Connecticut; ScM, Harvard University

Ingrid Binswanger, Adjunct Professor. MD, University of California, Berkeley/University of California, San Francisco Joint Medical Program; MPH, University of California, Berkeley

Benjamin Broder, Senior Lecturer. PhD, University of Southern California School of Medicine; PhD, University of Southern California

Susan Brown, Adjunct Associate Professor. PhD, Boston University School of Medicine; MA, Boston University

Jeffrey (Jeff) Burack, Professor. MD, Harvard Medical School; MPP, Harvard University

Bette Caan, Professor. DrPH, University of California, Berkeley; MPH, University of California, Berkeley

Resa R. Caivano, Assistant Professor. MD, Howard University College of Medicine; MPH, Simmons University

Cynthia I. Campbell, Associate Professor. PhD, University of Michigan; MPH, University of California, Los Angeles

Lori Carter-Edwards, Professor. PhD, University of North Carolina at Chapel Hill; MPH, University of California, Los Angeles

Nicole Cervantes, Adjunct Lecturer. MD, Michigan State University College of Human Medicine

John T. Chang, Assistant Professor. MD, Northwestern University Feinberg School of Medicine; PhD, University of California, Los Angeles; MPH, Yale University

Chun Chao, Professor. PhD, University of California, Los Angeles; MS, Harvard University

Huiju (H. Carrie) Chen, Professor. MD, University of California, San Francisco School of Medicine; PhD, Utrecht University and University Medical Center

Isabel Chen, Associate Professor. MD, University of British Columbia Faculty of Medicine; MPH, Yale University

Hélène Choquet, Associate Professor. PhD, Lille 2 University; DU, Lille 2 University; MS, Lille 1 University

Ngozi Chukwu-Abayomi, Assistant Professor. MD, Charles R. Drew University of Medicine and Science/University of California, Los Angeles David Geffen School of Medicine; MPH, California State University, Northridge

Paul J. Chung, Professor. MD, Harvard Medical School; MS, University of Chicago

Morgan N. Clennin, Assistant Professor. PhD, University of South Carolina, Arnold School of Public Health; MPH, Saint Louis University

Karen J. Coleman, Professor. PhD, University of Georgia; MS, University of Georgia

Maureen T. Connelly, Professor Emeritus. MD, Cornell University; MPH, Harvard University

Marisa L. Conner, Lecturer. MPP, University of California, Los Angeles

Lisa A. Croen, Professor. PhD, University of California, Berkeley; MPH, University of California, Berkeley

Francis (Jay) J. Crosson, Senior Lecturer. MD, Georgetown University School of Medicine

Anna C. Davis, Assistant Professor. PhD, University of California, Los Angeles Fielding School of Public Health; MPH, Boston University

Vanessa W. Davis, Lecturer. MPH, University of California, Berkeley; MPH, University of California, Berkeley

Rebecca M. Deans, Instructor. MD, Albany Medical College

Sascha Dublin, Associate Professor. MD, University of Washington School of Medicine; PhD, University of Washington

Elizabeth M. Cespedes Feliciano, Professor. ScD, Harvard University; MS, Harvard University

Marlaine S. Figueroa Gray, Assistant Professor. PhD, University of Washington; MA, University of Washington; MA, University of Maryland

Jonathan (Jon) A. Finkelstein, Professor. MD, Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania; MPH, Harvard University

Stephen Fortmann, Professor. MD, University of California, San Francisco School of Medicine

Tadashi (Tad) Funahashi, Lecturer. MD, David Geffen School of Medicine at UCLA

Abraham Gallegos, Assistant Professor. MD, David Geffen School of Medicine at UCLA; MS, University of California, Los Angeles

Jennifer C. Gander, Adjunct Associate Professor. PhD, University of South Carolina, Arnold School of Public Health; MSPH, University of South Carolina; PhD, Arnold School of Public Health

Nicole M. Gatto, Associate Professor. PhD, University of Southern California Keck School of Medicine; MPH, University of California, Los Angeles

Darios Getahun, Associate Professor. PhD, Rutgers University School of Public Health; MD, Leipzig University; MPH, University of Medicine and Dentistry of New Jersey

Alan S. Go, Professor. MD, University of California, San Francisco School of Medicine

Ying-Ying Goh, Adjunct Associate Professor. MD, Stanford University School of Medicine; MSHS, University of California, Los Angeles

Anjali Gopalan, Assistant Professor. MD, Washington University in St. Louis School of Medicine; MS, University of Pennsylvania

Michael Gould, Professor. MD, State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine; MS, Stanford University

Richard W. Grant, Professor. MD, University of California, San Francisco School of Medicine; MPH, Harvard University

Richard Grantham, Member of the Faculty. BA, University of Georgia

Beverly (Bev) B. Green, Professor. MD, Medical College of Ohio; MPH, University of Washington

Sheridan Green, Assistant Professor. PhD, University of Northern Colorado, College of Education and Behavioral Sciences; MS, Colorado State University

Paul Gregerson, Adjunct Instructor. MD, Medical College of Wisconsin; MBA, University of Notre Dame

David Grossman, Adjunct Professor. MD, David Geffen School of Medicine at UCLA; MPH, University of Washington

Erica P. Gunderson, Professor. PhD, University of California, Berkeley School of Public Health; MS, University of California, Berkeley; MPH, University of California, Berkeley

Amisha Gupta, Lecturer. MS, Harvard University, School of Public Health; MPH, University of California, Los Angeles

Erin E. Hahn, Associate Professor. PhD, University of California, Los Angeles; MPH, University of California, Los Angeles

Reina Haque, Professor. PhD, University of California, Berkeley; MPH, University of California, Los Angeles

Laura B. Harrington, Assistant Professor. PhD, University of Washington; MPH, University of Michigan

Rulin C. Hechter, Assistant Professor. PhD, University of California, Los Angeles; MD, Soochow University Medical School; MS, Fudan University

Monique Hedderson, Associate Professor. PhD, University of Washington; MPH, University of Washington

Nora Henrikson, Associate Professor. PhD, University of Washington School of Public Health and Community Medicine; MPH, University of North Carolina

Matthew E. Hirschtritt, Member of the Faculty. MD, Case Western Reserve University School of Medicine; MPH, Case Western Reserve University

Tiffany Hoang, Lecturer. MPH, San Diego State University

Michael A. Horberg, Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine; MAS, University of California, San Francisco

Robert B. Hufnagel, Member of the Faculty. MD, University of Cincinnati College of Medicine; PhD, University of Cincinnati

Estibaliz (Esti) Iturralde, Assistant Professor. PhD, University of Southern California Keck School of Medicine; MA, University of Southern California

Sachin H. Jain, Adjunct Senior Lecturer. MD, Harvard Medical School; MBA, Harvard University

Joyce R. Javier, Associate Professor. MD, University of California, Irvine School of Medicine

Menal Jham, Adjunct Lecturer. MD, Tulane University School of Medicine

Jae Won Joh, Instructor. MD, Baylor College of Medicine School of Medicine

Scott Y. Johnson, Instructor. EdD, University of La Verne; MLIS, San Jose State University

David M. Kadar, Adjunct Lecturer. DDS, New York University College of Dentistry

Michael Kanter, Professor. MD, University of California, San Francisco School of Medicine

Aniket A. Kawatkar, Assistant Professor. PhD, University of Southern California; MS, University of Houston

Cheryl Kelly, Associate Professor. PhD, St Louis University; MPH, St Louis University

Jung Kim, Adjunct Assistant Professor. PhD, University of California, Berkeley; MPH, University of California, Berkeley

Nicola (Nicky) Klein, Professor. MD, New York University Grossman School of Medicine; PhD, New York University

Corinna Koebnick, Associate Professor. PhD, University of Giessen; MS, University of Giessen

Candyce Kroenke, Professor. ScD, Harvard University School of Public Health; MPH, University of Minnesota

Ashwini Lakshmanan, Associate Professor. MD, Keck School of Medicine of the University of Southern California; MS, University of Southern California; MPH, Harvard University

Jennifer O. Lam, Assistant Professor. PhD, Johns Hopkins University, Bloomberg School of Public Health; MPH, Johns Hopkins University

Gwendolyn (Gwen) Lapham, Assistant Professor. PhD, University of Washington School of Public Health and Community Medicine; MPH, University of Washington; MSW, University of Washington

Eric B. Larson, Professor Emeritus. MD, Harvard Medical School; MPH, University of Washington

Karen Lauterbach, Adjunct Lecturer. BA, University of California, Santa Barbara

Nicole L. Lawson, Assistant Professor. PhD, University of California, Los Angeles

Phillip Le, Adjunct Instructor. MD, Ross University School of Medicine

Erin LeBlanc, Professor. MD, Yale School of Medicine; MPH, Oregon Health & Science University

Jeffrey (Jeff) K. Lee, Associate Professor. MD, University of California, San Diego School of Medicine; MPH, Harvard University; MAS, University of California, San Diego

Benjamin Leong, Lecturer. MD, Tulane University School of Medicine; MPH, Tufts University; MS, Tufts University

Theodore Robert (TR) Levin, Professor. MD, Emory University School of Medicine; MS, Georgetown University

Sharon L. Levine, Adjunct Senior Lecturer, MD, Tufts University School of Medicine

Tracy A. Lieu, Professor. MD, University of California, San Francisco School of Medicine; MPH, University of California, Berkeley

Jennifer S. Lin, Professor. MD, New York University Grossman School of Medicine; MCR, Oregon Health & Science University

Vincent Liu, Associate Professor. MD, New York University Grossman School of Medicine; MS, Stanford University; MS, Stanford University

Chia-Mei (Joan) Lo, Professor. MD, Harvard Medical School; MS, University of California, Los Angeles

Alma A. Lopez, Assistant Professor. MD, David Geffen School of Medicine at UCLA

Anna (Aziza) Lucas-Wright, Adjunct Lecturer. MEd, Loyola Marymount University

Wendy S. Madigosky, Associate Professor. MD, George Washington University School of Medicine and Health Sciences; MSPH, University of Missouri, Columbia

Rishi Manchanda, Adjunct Lecturer. MD, Tufts University School of Medicine; MPH, Tufts University

Rita M. Mangione-Smith, Professor. MD, Wayne State University School of Medicine; MPH, University of California, Los Angeles

Ben J. Marafino, Assistant Professor. PhD, Stanford University School of Medicine

Jennifer McClure, Professor. PhD, Louisiana State University; MA, Louisiana State University

Elizabeth (Beth) A. McGlynn, Professor. PhD, Pardee Rand Graduate School; MPP, University of Michigan

Hugh L. McManus, Adjunct Lecturer. PhD, Stanford University School of Medicine; MS, Massachusetts Institute of Technology

Sarita Mohanty, Adjunct Associate Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine; MPH, Harvard University; MBA, University of California, Los Angeles

Richard Mularski, Professor. MD, University of Arizona College of Medicine - Tucson; MCR, Oregon Health & Science University; MSHS, University of California, Los Angeles

Claudia Leonie Nau, Associate Professor. PhD, Penn State University; MA, Penn State University; MA, University of Geneva

Sonya L. Negriff, Associate Professor. PhD, University of Southern California; MA, University of Southern California

Heidi D. Nelson, Professor. MD, University of Minnesota Medical School; MPH, University of Minnesota

Jennifer (Jen) Clark Nelson, Professor. PhD, University of Washington; MSPH, University of Washington

Quyen Ngo-Metzger, Professor. MD, University of Chicago Division of the Biological Sciences, The Pritzker School of Medicine; MPH, Harvard University

Huong Nguyen, Professor. PhD, University of California, San Francisco; MS, University of California, San Francisco; MS, University of Washington

Robert Sayoc Nocon, Assistant Professor. PhD, University of Chicago, Department of Public Health Sciences; MHS, Johns Hopkins University

Kelly O'Neal, Lecturer. DrPH, University of Illinois at Chicago, School of Public Health

Bohdan (Bo) W. Oppenheim, Adjunct Lecturer. PhD, University of Southampton; MS, Stevens Institute of Technology

Cecilia (Ceci) Oregón, Lecturer. MPP, University of California, Berkeley; MPH, University of California, Berkeley

Ted E. Palen, Assistant Professor. PhD, University of Colorado; MD, University of Colorado, Denver; MSPH, University of Colorado Health Sciences Center

Carrie D. Patnode, Associate Professor. PhD, University of Minnesota; MPH, Emory University Roger Peeks, Adjunct Lecturer. MD, Stanford University School of Medicine

Robert (Rob) Penfold, Associate Professor. PhD, University of Toronto Faculty of Medicine; MA, University of Waterloo

Kristina T. Phillips, Associate Professor. PhD, Bowling Green State University; MA, Bowling Green State University

Christian Port, Adjunct Lecturer. MPA, University of Southern California Price School of Public Policy

Ali Poyan Mehr, Member of the Faculty. MD, Charité-Universitätsmedizin Berlin Medizinische Fakultät

Heather A. Prentice, Associate Professor. PhD, University of Alabama at Birmingham; MPH, University of Kentucky

Alice R. Pressman, Professor. PhD, University of California, Berkeley; MS, University of Wisconsin

Angelico (Iko) N. Razon, Assistant Professor. MD, David Geffen School of Medicine at UCLA; MPH, Harvard University; MSPH, University of Pennsylvania

Mary Reed, Associate Professor. DrPH, University of California, Berkeley; MPH, University of California, Berkeley

Kristi Reynolds, Professor. PhD, Tulane University; MPH, Tulane University

Kathryn Ridout, Associate Professor. MD, Penn State College of Medicine; PhD, The Pennsylvania State University

Nardine Riegels, Associate Professor. MD, University of California, San Francisco School of Medicine

Craig W. Robbins, Associate Professor. MD, University of Michigan Medical School; MPH, University of Pittsburgh

James (Jay) L. Robinson III, Lecturer. PsyD, Virginia Consortium for Professional Psychology; MBA, Concordia University Chicago

Bernadette A. Rodriguez, Lecturer. MBA, The Wharton School of Business

Luis A. Rodriguez, Assistant Professor. PhD, University of California, San Francisco; MPH, University of California, Berkeley

John A. Roohan, Adjunct Instructor. MD, Georgetown University School of Medicine; MS, Georgetown University

Dori E. Rosenberg, Professor. PhD, San Diego State University and University of California, San Diego; MPH, San Diego State University

Murray N. Ross, Adjunct Senior Lecturer. PhD, University of Maryland College Park; MA, University of Maryland

Gery Ryan, Professor. PhD, University of Florida; MA, University of Florida

Aliza (A. Blythe) Ryerson, Associate Professor. PhD, Laney Graduate School, Emory University, Rollins School of Public Health, Department of Epidemiology; MPH, Emory University

Lori Sakoda, Associate Professor. PhD, University of Washington; MPH, University of California, Berkeley

Lucy A. Savitz, Adjunct Professor. PhD, University of North Carolina at Chapel Hill; MBA, University of Denver

Mark A. Schmidt, Assistant Professor. PhD, University of Michigan; MPH, University of Michigan Julie Schmittdiel, Professor. PhD, University of California, Berkeley; MA, University of California, Berkeley

Joanne Schottinger, Associate Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine

Mark A. Schuster, Professor. MD, Harvard Medical School; PhD, Pardee Rand Graduate School; MPP, Harvard University

Pamela M. Schwartz, Lecturer. MPH, San Jose State University, School of Public Health

Anand R. Shah, Lecturer. MD, Medical College of Wisconsin; MSHP, University of Pennsylvania

Michael Silverberg, Professor. PhD, Johns Hopkins University, Bloomberg School of Public Health; MPH, University of California, Los Angeles

Gregory (Greg) Simon, Professor. MD, University of North Carolina School of Medicine; MPH, University of Washington

Andrew (Andy) M. Slavitt, Adjunct Senior Lecturer. MBA, Harvard Business School

Loel S. Solomon, Professor. PhD, Harvard University; MPP, University of California, Berkeley

Steven G. Steinberg, Lecturer. MD, University of California, San Diego School of Medicine

Claudia A. Steiner, Professor. MD, University of Colorado School of Medicine; MPH, Johns Hopkins University

Stacy Ann Sterling, Professor. DrPH, University of North Carolina, Gillings School of Global Public Health, Health Policy and Management; MSW, University of California, Berkeley; MPH, University of California, Berkeley

John K. Su, Assistant Professor. MD, Boston University Aram V. Chobanian & Edward Avedisian School of Medicine; MPH, Boston University

Sara Y. Tartof, Professor. PhD, University of California, Berkeley School of Public Health; MPH, University of California, Berkeley

Maile Tauali'i, Assistant Professor. PhD, University of Washington, School of Public Health; MPH, University of Washington

Hung (Hung Fu) Tseng, Professor. PhD, University of California, Los Angeles; MPH, University of California, Los Angeles

Juan F. Vargas, Clinical Assistant Professor. MD, University of California, Irvine School of Medicine

Rafael Villaruz, Lecturer. EdD, University of Southern California; MBA, California State University, Fullerton

Anne T. Vo, Associate Professor. PhD, University of California, Los Angeles; MAEd, University of California, Los Angeles

Gary Waymire, Adjunct Lecturer. MArch, University of Michigan

Matthew Welzenbach, Assistant Professor. MD, Chicago Medical School at Rosalind Franklin University of Medicine and Science

Karen Wernli, Professor. PhD, University of Washington School of Public Health; MS, University of Texas at Houston

Shawn Wilson, Assistant Professor. PhD, Indiana University-Purdue University Indianapolis, Urban Education

Anny H. Xiang, Professor. PhD, University of Southern California; MS, University of Southern California; MS, Shanghai Medical University

Stanley (Stan) Xu, Associate Professor. PhD, University of Colorado, Health Sciences Center, Department of Biometrics; MS, University of Colorado, Denver; PhD, Beijing Agricultural University; MS, Beijing Agricultural University

Bobbi Jo H. Yarborough, Associate Professor. PsyD, Pacific University; MA, Pacific University

Monica A. Yoshinaga, Lecturer. PharmD, University of Southern California School of Pharmacy

Deborah Rohm Young, Professor. PhD, University of Texas; MBA, Texas Christian University

Scott S. Young, Lecturer. MD, University of Oklahoma College of Medicine

Kelly Young-Wolff, Professor. PhD, University of Southern California; MPH, University of Southern California

Ousseny Zerbo, Associate Professor. PhD, University of California, Davis

Hui Zhou, Assistant Professor. PhD, University of Southern California; MS, University of Southern California; PhD, Wuhan University

Yeyi Zhu, Professor. PhD, The University of Texas at Austin Dell Medical School; MS, The University of Texas at Austin