

<b>Reviewed by MCAEC:</b> 4/10/18 – 4/20/18	<b>Responsible University Officer:</b> Dean of Student Affairs
<b>Reviewed by Legal Counsel:</b> 6/11/18	<b>Policy Owner:</b> Dean of Student Affairs
<b>Approved by Dean’s Executive Committee:</b> 5/2/18	<b>Policy Contact:</b> Dean of Student Affairs
<b>Dean’s Final Approval:</b> 6/13/18	

**Technical Standards & Policy**

POLICY HISTORY	
Review Date:	Change Description:
6/13/18	Dean approved.
Review History:	Change Description:
6/1/11	Rewritten.
8/5/13	Additional language was added by the Dean and Upstate University Legal Counsel.
3/26/18	Technical Standards from Student Handbook reformatted into policy and specific procedures for policy added.
6/11/18	Legal Counsel suggested defining MD degree.

**POLICY STATEMENT**

The College of Medicine’s curriculum is designed to provide the general education necessary for the practice of medicine. It permits students to learn the fundamental principles of medicine, to acquire skills of critical judgment based on education and experience, and to develop an ability to use principles and skills wisely in maintaining health and treating illness. A candidate for the Doctor of Medicine degree (M.D.) must possess abilities and skills that include those that are observational, communicational, motor intellectual-conceptual (integrative and quantitative), behavioral and social and emotional. The use of a trained intermediary is not acceptable in many clinical situations in that it implies that a candidate's judgment must be mediated by someone else's power of selection and observation. These Technical Standards define abilities and attributes that are required of all admitted students, all students progressing through the curriculum, and of graduating students. If a student does not possess these abilities and attributes they will not be admitted, and if for any reason they are unable to maintain them they will be dismissed.

**THE TECHNICAL STANDARDS INCLUDE**

1. Observation: The abilities in this category necessitate the functional use of visual, auditory, and somatic sensation. In any case where a candidate’s ability to observe or acquire information through these sensory modalities is compromised, the candidate must demonstrate alternative means and/or abilities to acquire and demonstrate the essential information conveyed in this fashion.
  - a. Acquire a defined level of required information as presented through demonstrations and experiences in the basic sciences, including but not limited to information conveyed through lectures, small group activities, laboratory dissection and demonstrations, microbiologic cultures, and microscopic images of microorganisms and tissues in normal and pathologic states.

- b. Observe a patient accurately, at a distance, and close at hand. To acquire information from written documents, computer-information systems (including literature searches and data retrieval) and identify information as presented in images from paper, films, slides or video.
  - c. Interpret x-ray and other graphic images, and digital or analog representations of physiologic phenomenon (such as EKGs) with or without the use of assistive devices.
2. Communication: The abilities in this category necessitate the abilities of oral and written communication and proficiency in keyboarding.
  - a. Speak, hear, and observe patients by sight in order to accurately elicit from a patient, a medical history and other information required to adequately and effectively evaluate a patient's medical condition.
  - b. Communicate effectively, sensitively, and efficiently with patients, their families, and all members of the healthcare team about a patient's condition as called for under the circumstances.
3. Motor: The abilities in this category require coordination of both gross and fine muscular movements, equilibrium, and functional use of touch and vision senses.
  - a. Use and interpret information from diagnostic maneuvers (e.g. palpation, auscultation, percussion) and from diagnostic instruments (e.g. sphygmomanometer, otoscope, ophthalmoscope) during the course of conducting a comprehensive physical examination of a patient.
  - b. Perform specific procedures including, but not limited to Basic Life Support (BLS) techniques, such as CPR, starting an IV, drawing arterial and venous blood, inserting and removing a Foley catheter, obtaining specimens, performing basic laboratory tests and diagnostic procedures, and providing wound care (e.g. simple debridement, simple suturing and suture removal, dressing changes).
4. Intellectual-Conceptual (Integrative and Quantitative) Abilities - Measure, calculate, reason, analyze, integrate and synthesize, including the comprehension and understanding of three-dimensional relationships. Problem solving must be performed in a timely manner.
5. Behavioral and Social Attributes
  - a. Respond appropriately to emergencies, urgencies, and other situations within the hospital, clinic, ambulatory facility, or other location, and assist co-workers in providing appropriate care.
  - b. Adapt and function effectively under the various circumstances and rigors that are inherent in the clinical practice of medicine. This includes the ability to tolerate physically taxing workloads.
  - c. Utilize intellectual ability, exercise proper judgment, timely and accurately complete responsibilities intrinsic in patient care.
  - d. Develop effective and appropriate relationships with patients, colleagues, co-workers, and relevant others, irrespective of gender, age, race, sexual orientation, and religion.
  - e. Comply with laboratory safety measures and regulation, practice universal precautions against contamination and cross-contamination with infectious pathogens (e.g. Wearing personal protective equipment; working with sharp objects and hazardous chemicals; treating patients with infectious diseases).
6. Emotional: Doctoring is an emotional business. Patients seek care at the very times in their lives that are most fraught with distressing emotions, believing that their physician can help. Therefore, the following skills of emotional competence are required of physicians and physicians in training:
  - a. Recognize, name, and converse about one's own emotions, and those of one's patients, using situational and expressive cues that have some degree of cultural consensus as to their emotional meaning, while at the same time understanding that outer expression may not correspond exactly to inner emotional state;
  - b. Involve oneself empathetically and helpfully in the emotional experience of others; and
  - c. Cope adaptively with distressing emotions by using productive self-regulatory strategies that ameliorate their intensity and/or duration.

## REASONS FOR POLICY

### LCME Element 10.5 Technical Standards

A medical school develops and publishes Technical Standards for the admission, retention, and graduation of applicants or medical students in accordance with legal requirements.

**PROCEDURES**

Review & Approval of Technical Standards: The Technical Standards and Policy will be confirmed current or reviewed and updated on a 5-year cycle.

Dissemination of Technical Standards: The Technical Standards for admission, retention, and graduation are disseminated to potential and actual applicants at the point of interview and acceptance. Enrolled medical students, faculty, and others can review the Technical Standards in the Student Handbook on the Student Affairs website:  
[http://www.upstate.edu/com/admissions/tech\\_standards.php](http://www.upstate.edu/com/admissions/tech_standards.php)

Documentation: Medical school applicants receive the Technical Standards at the point of interview. They also receive the Technical Standards in their acceptance packet and must sign off on the statement, "I have received and read the Technical Standards for the program I have been accepted into and I am able to perform them with or without reasonable accommodation. NOTE: This determination may be subject to further evaluation by Upstate in accordance with the requirements of the Americans with Disabilities Act."

**DEFINITIONS**

There are no definitions associated with this policy.

**FAQ**

There are no FAQ associated with this policy.

**APPENDICES**

There are no appendices associated with this policy.

**RELATED INFORMATION**

LCME Functions and Structure of a Medical School <http://lcme.org/publications/>

**SIGNATURE**



6/13/18

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Signature Dean of the College of Medicine

Date