

writing, within 10 working days of this meeting of the decision and of the process of review.

Administration

Administration

Dean: Leslie W. Hall, M.D.

Senior Associate Dean of Strategic Academic Affairs: R. Caughman Taylor, M.D.

Associate Dean for Academic Affairs: Joshua T. Thornhill IV, M.D.

Associate Dean for Diversity and Inclusion: Carol L. McMahon, M.D.

Associate Dean for Graduate Medical Education: Charles J. Carter, M.D.

Associate Dean for Undergraduate Medical Education: Carol A. Nichols, Ph.D.

Associate Dean for Research and Graduate Education, Francis G. Spinale, M.D., Ph.D.

Associate Dean for Student Affairs: Eric R. Williams, M.D.

Assistant Dean for Administration and Finance: Derek B. Payne, M.B.A.

Assistant Dean for Clinical Curriculum and Assessment: Brian D. Keisler, M.D.

Assistant Dean for Clinical Learning: James W. Cook, M.D.

Assistant Dean for Continuous Professional Development and Strategic Affairs: J. Matthew Orr, Ph.D.

Assistant Dean for Diversity and Inclusion: Robert M. Rhinehart, Ph.D.

Assistant Dean for Executive Affairs and Director of Library Services: Ruth A. Riley, M.S.

Assistant Dean for Information Technology and Chief Information Officer: D. Lindsie Cone, M.D.

Assistant Dean for Medical Student Education-Florence: Alan G. Sechtin, M.D.

Assistant Dean for Preclinical Curriculum: Falcia H. Harvey, Ph.D.

Director of Admissions and Enrollment Services/Registrar: Robert M. Rhinehart, Ph.D.

Department Chairs

Chair, Department of Cell Biology and Anatomy: Wayne E. Carver, Ph.D.

Chair, Department of Family and Preventive Medicine: Jamee H. Steen, M.D.

Chair, Department of Internal Medicine: Sharon B. Weissman, M.D.

Chair, Department of Neurology: Souvik Sen, M.D.

Chair, Department of Neuropsychiatry and Behavioral Science: Meera Narasimhan, M.D.

Chair, Department of Obstetrics and Gynecology: Berry A. Campbell, M.D.

Chair, Department of Orthopaedic Surgery: Christopher G. Mazoué, M.D.

Chair, Department of Pathology, Microbiology and Immunology: Mitzi Nagarkatti, Ph.D.

Chair, Department of Pediatrics: R. Caughman Taylor, M.D.

Chair, Department of Pharmacology, Physiology and Neuroscience: Marlene A. Wilson, Ph.D.

Chair, Department of Radiology: Floyd E. Bell III, M.D.

Chair (Interim), Department of Surgery: Julian A. Kim, M.D.

Admissions

Applicants admitted to the University of South Carolina School of Medicine are selected by an admissions committee composed of members of the basic science and clinical science faculties of the School of Medicine, University faculty, medical students, and area clinicians. In making selections from each year's group of applicants, members of the Admissions Committee recognize that they are selecting future physicians. The admissions procedure is therefore an effort to select

applicants who possess the individual characteristics required for both the study and practice of medicine.

The Admissions Committee considers all aspects of an applicant's application in the decision-making process. We use a holistic process to review each application, taking into account an applicant's unique academic and professional background. As a South Carolina based school, we prioritize applicants who have a significant connection to South Carolina.

Technical Standards

Technical Standards for Admission, Retention and Graduation.

The School of Medicine has adopted the following technical standards:

The curriculum of the University of South Carolina School of Medicine Columbia has been designed to provide a general professional education leading to the medical doctor (M.D.) degree and to prepare undifferentiated students to enter graduate medical training in a wide variety of medical specialties and sub-specialties. All candidates for admission to and all current students at the School of Medicine, herein after designated as candidates for the M.D. degree, should possess sufficient intellectual capacity, physical ability, emotional and psychological stability, interpersonal sensitivity, and communication skills to acquire the scientific knowledge, interpersonal and technical competencies, professional attitudes, and clinical abilities required to pursue graduate medical education and to meet all requirements for medical licensure, which are not necessarily as flexible as the School of Medicine's requirements. All candidates should be aware that the academic and clinical responsibilities of medical students may, at times, require their presence during day and evening hours, seven days per week. Candidates should be able to tolerate physically taxing workloads and to function effectively under stress. Individuals whose performance is impaired by abuse of alcohol or other substances are not suitable candidates for admission, promotion, or graduation.

While the School of Medicine fully endorses the spirit and intent of Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1992, and the ADA Amendments Act of 2008, it also acknowledges that certain minimum technical standards must be present in candidates for admission, retention and graduation. Patient safety and well-being are considered as major factors in the determination of requirements regarding the physical, cognitive, and emotional abilities of all candidates. Those individuals who would constitute a direct threat to the health or safety of themselves, patients, or others are not considered suitable candidates for admission or retention in medical school.

The delineation of technical standards is required by the Liaison Committee on Medical Education to confirm that accreditation standards are being met. Although these standards serve to delineate the necessary physical and mental abilities of all candidates, they are not intended to deter any qualified candidate for whom reasonable accommodation will allow fulfillment of the complete curriculum. A "qualified person with a disability" is an individual with a disability who meets the academic and technical standards requisite to admission or participation in the School of Medicine's educational programs, with or without reasonable accommodations. Each applicant to the School of Medicine, as part of the school's supplemental application, is required to acknowledge in writing the reading, understanding, and meeting of all technical standards. Candidates for admission who have a disability and use accommodations should begin discussions with the University of South Carolina Student Disability Resource Center (<http://www.sa.sc.edu/sds/>) either prior to or as soon as the offer of admission

is received and accepted. All candidates (admission candidates and current students) with disabilities bear the responsibility of providing that office with current information documenting the general nature and extent of the disability and the proposed accommodations. Evaluating and facilitating accommodation requests is a collaborative effort among the candidate, the School of Medicine, and the UofSC Student Disability Resource Center. The School of Medicine reserves the right to request new or additional information through the Student Disability Resource Center should a candidate/student have or develop a condition that would place patients, the candidate/student, or others at risk or that may affect his/her need for accommodation.

The School of Medicine has established the following technical standards for admission to, retention in, and graduation from, the M.D. program:

- Observation

Candidates/students must be able to observe demonstrations, collect data, and participate in experiments and dissections in the basic sciences, including but not limited to, demonstrations in animals, microbiologic cultures, and microscopic studies of microorganisms and tissues in normal and pathologic states. Candidates/students must be able to accurately observe patients and integrate these observations with the findings obtained during the elicitation of a medical history and performance of a physical examination in order to develop an appropriate diagnosis and establish a therapeutic plan.

- Communication

Candidates/students must be able to communicate effectively and efficiently in the English language in oral and written form with patients and their families and all members of the health care team. They must be able to obtain a medical history and perform a mental status examination, interpret non-verbal aspects of communication, and establish therapeutic relationships with patients. Candidates/students must be able to accurately and clearly record information.

- Motor Function

Candidates/students must possess the capacity to perform complete physical examinations and diagnostic maneuvers. Candidates/students should be able to respond to emergency situations in a timely manner and to execute motor movements required to provide general and emergency treatment to patients. They must adhere to universal precaution measures and meet safety standards applicable to inpatient and outpatient settings and other clinical activities. Candidates/students must be mobile and able to function independently within the clinical environment.

- Intellectual-Conceptual, Integrative and Quantitative Abilities

Candidates/students must be able to ultimately make logical diagnostic and therapeutic judgments. Candidates/students should be able to make measurements, calculate, and reason; to analyze, integrate, and synthesize data; and to problem-solve. Candidates/students should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures. Candidates/students should be able to integrate rapidly, consistently, and accurately all data received by whatever sense(s) employed.

- Behavioral and Social Attributes

Candidates/students must be able to establish appropriate relationships with a wide range of faculty members, professional colleagues, and patients. Candidates/students should possess the personal qualities of integrity, empathy, concern for the welfare of others, interest, and motivation. They should possess the emotional and psychological health required for the full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities associated with the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients, patients' families, and professional colleagues. They must be able to adapt to changing environments, to be flexible, and to function in the face of ambiguities inherent in the clinical situation.

In evaluating candidates for admission and candidates for the M.D. degree, it is essential that the integrity of the curriculum be maintained, that those elements deemed necessary for the education of a physician be preserved, and that the health and safety of patients be maintained. While compensation, modification, and accommodation can be made for some disabilities on the part of candidates/students, candidates must be able to perform the duties of a student and of a physician in a reasonably independent manner. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if it requires a substantial modification in an element of the curriculum that is considered essential, if it lowers academic standards, or if it poses an undue administrative or financial burden. The use of a trained intermediary would result in mediation of a candidate's judgment by another person's powers of selection and observation. Therefore, the use of trained intermediaries to assist students in meeting the technical standards for admission, retention, or graduation would constitute an unacceptable substantial modification, except in rare circumstances, and is not permitted.

The School of Medicine will consider for admission any candidate who has the ability to perform or to learn to perform the skills and abilities specified in these technical standards. Candidates for the M.D. degree will be assessed at regular intervals not only on the basis of their academic abilities, but also on the basis of their non-academic (physical, interpersonal, communication, psychological, and emotional) abilities to meet the requirements of the curriculum and to graduate as skilled and effective medical practitioners. The faculty and administration bear significant responsibility in ensuring that the technical standards are maintained by all candidates.

Preparation

While the School of Medicine does not have any prerequisite requirements, for most applicants a strong preparation in the natural sciences is highly recommended including general biology, general chemistry, organic chemistry, and biochemistry. Further advanced studies in the biological, physical and/or chemical sciences is encouraged.

Preference is given to applicants who will, upon enrollment, hold a bachelor's degree. Applicants occasionally are admitted on the basis of 90 semester hours of outstanding undergraduate achievement.

As a matter of policy, the School of Medicine can accept applications only from those individuals who are currently citizens of the United States or who are permitted by the Immigration and Naturalization Service to reside permanently in the United States.

The School of Medicine can accept applications only from those individuals who have completed their undergraduate premedical educations at a college or university in the United States or Canada.

The Medical College Admissions Test (MCAT)

All applicants to the School of Medicine are required to take the Medical College Admissions Test (MCAT). The MCAT should be taken no more than four years prior to the time of application and no later than the fall by the end of September of the year of application. The MCAT is offered several times each year and is administered in colleges and universities throughout the country. It is recommended that applicants consider taking the MCAT at least two times. Registration materials can be accessed at <http://www.aamc.org/students/mcat/registration.htm>

Application Procedures

Inquiries concerning admission should be addressed to:

admissions@uscmed.sc.edu

Office of Admissions and Enrollment Services
School of Medicine
University of South Carolina
School of Medicine VA Campus Bldg. 3
Columbia, SC 29208
803-216-3625

The School of Medicine participates in the American Medical College Application Service (AMCAS). Applications are submitted electronically and can be accessed at www.aamc.org (<http://www.aamc.org>). Applications are available on-line after May 1 and may be submitted after June 1. The deadline for submission of applications to AMCAS is November 1.

Following receipt and individual screening of the initial AMCAS application in the School of Medicine Office of Admissions and Enrollment Services, secondary application materials (including evaluations and a nonrefundable \$95 processing fee) will be requested from all qualified applicants selected to receive further consideration. Interviews on the School of Medicine campus are at the invitation of the Admissions Committee and are a required part of the admissions process for all applicants. For the 2021 cycle, all interviews will be virtual.

The deadline date of November 1 refers only to the date by which the basic application materials must be received at the AMCAS office; December 15 is the deadline date for receipt of all secondary application materials in the Office of Admissions and Enrollment Services. It is in the best interest of the applicant to submit the completed application as early in the application/admissions process as possible. It is the responsibility of the applicant to ensure that all application materials are received in the Office of Admissions and Enrollment Services by the deadline date. No application will be considered until all application materials have been received.

Admission Procedures

Offers of admission are made on a rolling basis after October 15 and throughout the year. An applicant who is offered a position in the next entering class will be required to accept or decline the offer within a two-week period. A \$250 non-refundable seat fee will be due with the Commit to Enroll selection beginning May 1.

An offer of admission is contingent upon the satisfactory completion of all requirements and conditions of admission.

Admitted applicants will be required to submit official transcripts from every college and university attended to the School of Medicine director of enrollment services/registrar prior to matriculation. These transcripts will be included in their School of Medicine academic records.

Assignment of Students for Third and Fourth Year Clinical Rotations

This policy will outline the procedures and guidelines for the assignment of students to either the Columbia campus or the Florence Regional campus for their third and fourth year clinical rotations. In assigning students to a clinical campus, the primary goal is to ensure adequate educational resources for every student to meet the educational objectives of the curriculum. While student preference will be considered in the assignment process, there is no guarantee that a student will be assigned to their preferred campus.

Application

Applicants, at the time of application, will be notified both on the School of Medicine's Website and through published material that two clinical campuses are available for assignment during the third and fourth year of medical school. On their secondary application, applicants will be asked if they are applying to be considered for the Columbia campus, Florence Regional campus, or both campuses.

Interview Day

Applicants will be invited for interviews based on guidelines established by the Admissions Committee and independent of campus preference. During interview day, applicants will be presented with information about both clinical campuses and have an opportunity to ask questions.

Offer Letter

When applicants are made an offer of acceptance into the class, they will be informed that assignment to a clinical campus will occur early in their first year. By accepting the offer the applicant will acknowledge that while they will be able to state a preference, there is no guarantee that they will be assigned to their preferred campus.

Matriculation

At the time of the applicant's matriculation into the School of Medicine in early-August, they will be scheduled for mandatory tours of the facilities and meetings with selected faculty from both clinical campuses. After the completion of the tours, students will be required to submit their preference for their clinical campus assignment.

Assignment

When possible, student preference will be used in the assignment of the clinical campus which will occur in Fall of the M-I year. If student preferences are not sufficient or exceed the educational resources of either campus, a lottery will be held to assign students and meet the educational resources of both campuses. Students will then be informed by the end of the semester of their assigned campus.

Switching Campuses

Students, who mutually agree, will be allowed to switch campuses after jointly making that request prior to January 1 of their M-II year. No switches will be allowed for the six months prior to the beginning of the M-III year.

Appeal

Students may, due to extenuating circumstances, appeal their assignment to a clinical campus up to January 1 of their M-II year. This appeal should be presented in writing to the Assistant Dean for Student Affairs and will be considered by the Student Services Committee, who will make a recommendation to the Associate Dean for Medical Education and Academic Affairs. In general, extenuating circumstances should be considered to be out of the student's control and/or the current assignment would cause undue hardship on the student and not simply that the student's preference for their clinical campus was not met.

Consideration of the appeal will also need to take into account the availability of educational resources at the other clinical campus.

Transfer

Once the clinical assignment is made and the student has begun their M-III year, they are expected to complete all required clerkships and clinical rotations (except for electives) on their assigned clinical campus.

Should a student wish to transfer campuses, they would need to follow the same procedure for the appeal of their clinical assignment. Transfers would only be granted under extenuating circumstances and if sufficient educational resources are available at the other clinical campus.

Early Decision Plan

Through AMCAS, the School of Medicine participates in the Early Decision Plan (EDP). EDP applicants must be highly qualified and apply only to the University of South Carolina School of Medicine by August 1. All secondary application materials must be received in the Office of Admissions and Enrollment Services by August 15; the Admissions Committee will provide responses to EDP applicants by October 1. EDP applicants must take the MCAT no later than mid-July of the year of application. Successful EDP applicants will be constrained from applying to any other medical school and will have a place reserved for them in the entering class. EDP applicants not admitted under the Early Decision Plan will be reconsidered as regular candidates and will be able to initiate applications to other schools in time to be considered by them.

Timetable for Admission

Event	Date
Submission of AMCAS application	Earliest date-June 5 Latest date-December 1
Submission of supplementary materials	Latest date-December 15
Decision notice to applicants	Earliest date-October 15 Latest date-until class is filled
Submission of EDP applications	Earliest date-June 5 Latest date-August 1
Decision notice to EDP applicants	Latest date-October 1
Applicant's response to acceptance offer	Maximum time-two weeks
Non-Refundable Seat Fee	\$250 due with a Commit to Enroll selection beginning May 1
Estimated number of new entrants	100
Starting date	August

Delayed Matriculation

Applicants accepted to the School of Medicine may request a one-year delay of matriculation for reasons of personal and professional

development or significant extenuating circumstances. Application for delayed matriculation must be made, in writing, to the Office of Admissions and Enrollment Services by April 15. The application must contain a description of the specific reasons for the request. The Admissions Committee will make decisions on an individual basis by May 15. The School of Medicine reserves the right to limit the number of applicants granted delays of matriculation in each entering class. For additional information, contact the Office of Admissions and Enrollment Services.

If the request for delayed matriculation is granted, other requirements are as follows:

1. The delay of matriculation will be for a maximum of one year.
2. By May 1 of the year of delayed matriculation, the applicant must provide a written report containing documentation of completion of the purposes for the delay of matriculation for review and evaluation by the Admissions Committee. Delayed matriculation will be contingent upon review, evaluation, and acceptance by the Admissions Committee of the written report.
3. The applicant will agree not to apply to any other medical schools in the interim.
4. The applicant will submit a new AMCAS application for the following year's entering class.
5. The applicant's nonrefundable seat fee deposit will be retained by the School of Medicine for the following year's entering class.
6. The applicant will provide official transcripts of all additional academic work completed or in progress.
7. The applicant must agree, in writing, to accept the offer of delayed matriculation and all associated conditions.

Combined M.D./Ph.D.

A combined M.D./Ph.D. plan is available to students interested in careers in academic medicine or medical research. The plan permits students to receive both the M.D. degree and the Ph.D. degree in biomedical science in approximately six years.

Applicants interested in the combined M.D./Ph.D. plan must be admitted separately to each degree program. For additional information about the combined M.D./Ph.D. plan, contact:

Office of Graduate Studies
School of Medicine
University of South Carolina
Columbia, SC 29208
803-216-3321

Course Exemptions

All applicants accepted to the School of Medicine are expected to enroll and complete successfully all required courses. Occasionally an applicant with specialized training will enter the School of Medicine and apply to exempt specific required courses. With the concurrence of the assistant dean for preclinical curriculum and the appropriate department chair, the applicant may be given an examination to measure the applicant's degree of proficiency in the appropriate area. Any exemption should be granted before matriculation in the course and must be granted no later than one academic week after matriculation.

Transfer and Advanced Standing

The Admissions Committee will consider applications for transfer into the second-year and third-year medical school classes contingent upon the availability of positions. All applicants for transfer must be currently enrolled and in good standing in a medical school accredited by the Liaison Committee on Medical Education and meet the prerequisite requirements in order to receive consideration. All acceptances into the third year are conditional on verification by the National Board of Medical Examiners of an overall, average passing score on Step 1 of the United States Medical Licensing Examination taken by June 30 following completion of the second year.

Applications for transfer are available after January 1. All application materials (including supplemental information and a nonrefundable \$95 processing fee) must be received in the Office of Admissions and Enrollment Services by April 1. Supplemental information includes an essay on the reasons for transfer, letters of evaluation from the dean and two faculty members of the medical school in which the applicant for transfer is currently enrolled, and verification of MCAT scores. Requests for MCAT score verification should be addressed to:

Section for the MCAT
Association of American Medical Colleges
2450 N Street, NW
Washington, DC 20037-1126

If you need more information, call 202-828-0600.

For further information concerning application for transfer, contact:

Office of Admissions and Enrollment Services
School of Medicine
University of South Carolina
Columbia, SC 29208
803-216-3625

Residency in South Carolina

As a state-supported institution, the School of Medicine has a primary responsibility to train future physicians for the state of South Carolina. Preference for admission to the School of Medicine is therefore given to state residents. Determination of residency as defined by the University of South Carolina for the purpose of tuition and fees is the responsibility of the University Residency Office (<http://www.sc.edu/bursar/residency.shtml/>). For information concerning residency questions, contact:

Legal Residency Office
1244 Blossom Street
Suite 106
University of South Carolina
Columbia, SC 29208
803-777-5555

Course Descriptions

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- Neurology (NEUR) (p. 28)
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- Surgery (SURG) (p. 35)

Biomedical Science (BMSC)

BMSC D604 - Molecular Foundations of Medicine (8 Credits)

An eight-hour, spring semester course designed for first-year medical students incorporating biochemistry, molecular biology and genetics. With a focus on connecting fundamental biological processes to human pathologies, the course explores properties and functions of nucleic acids, mechanisms of inheritance, structure and function of proteins and enzymes, and cellular metabolism and bioenergetics. Examples of pathological changes at the molecular level will be used to illustrate how normal processes can be altered to induce a disease state. While the primary mode of instruction is lecture-based, incorporation of clinical correlation presentations and pathology perspectives will solidify the connections between basic processes and human diseases. Student mastery of course content will be assessed using department developed multiple choice exams and the National Board of Medical Examiners (NBME) biochemistry exam.

Cell Biol & Anatomy (MCBA)

MCBA D603 - Foundational Medical Anatomy (12 Credits)

A twelve-hour, fall semester, first-year medical course involving the combined comprehensive study of human gross anatomy, neuroanatomy, microscopic anatomy, and developmental anatomy. The macro and micro structure of cells, tissues, organs, and systems are studied through an integrated and regional approach, and the functional significance of their morphological features are presented. The course is presented and taught in a collaborative, learning atmosphere by which students learn the names, relationships, and basic functions of body structures. The course relies significantly on a commitment to rigorous independent study. Primary methods of instruction include: lecture; case-based discussion/presentation; ultrasonography; cadaveric laboratory dissections; microscopic laboratory experiences through slides, digitized images, and electron micrographs; and independent learning experiences. Students integrate basic concepts and principles of structures as they pertain to clinical medicine. Web-based instructional methods and videodisc databases are used to present human anatomy and other supporting information relating to overall course content, primarily during laboratory sessions. The goal of laboratory sessions is to facilitate critical thinking skills and correlation of basic science information with clinical problems. Modes of assessment include departmental written multiple choice/essay examination, laboratory practical examination, oral assessment/presentation, and objective structured clinical examination (OSCE).