This bill of rights was produced by the ArMA Medical Student Section and is not supported or endorsed by the LCME or COCA. Inclusion in this document does not imply that these terms are guaranteed or provided by individual medical school programs.
Arizona Medical Students' Bill of Rights

I. Education

With regard to education, medical students have the right to:

A medical education experience that facilitates professional and ethical development, to include:[1]

- program objectives that are outcome-based and support the development of medical student progress in competencies that the profession and the public expect of a physician
- education that addresses the ever-changing health care landscape in alignment with the American Medical Association three pillars and “Accelerating Change in Medical Education;”[2]
- individualized learning options as alternatives for a curriculum that is conscientiously objectionable (eg, based on religion or other affiliation)
- regularly scheduled didactics for which they are released from clinical duties;
- continuous access to evidence-based resources for exam preparation and patient care-related learning;
- institutional support and quality assurance of sufficient time spent by faculty to devote to the educational program to fulfill their teaching and supervisory responsibilities;[3]
- timely and relevant feedback on learning progression
- access to counselors, mentors, and advisors who are able to support diverse student needs[4]

In addition, osteopathic medical students have a right to:

A medical education experience that facilitates the development of the osteopathic core competencies of medical knowledge.[5]

[1] Functions and Structure of a Medical School. Standards for Accreditation of Medical Education Programs Leading to the MD Degree. Section 3, Section 6, 7. Available from: https://lcme.org/publications/
[3] Functions and Structure of a Medical School. Standards for Accreditation of Medical Education Programs Leading to the MD Degree. Section 4.

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II. Supervision

With regard to supervision in patient care settings, medical students have the right to:

Supervision from Residents and Fellows that is further adequately supervised by qualified physicians and/or non-physicians, to support the engagement of medical students in progressive responsibility, appropriate to their level of education, competence, and experience.[6]

III. Assessment & Evaluation

With regard to the assessment and evaluation practices, medical students have the right to:

Course, clerkship, and other program orientations that set clear expectations for performance assessment metrics[7]

Timely dissemination of program learning objectives to all medical students as well as those faculty, residents, and others with teaching and assessment responsibilities in those required experiences.

Assessment of learner performance that is characterized by:

- Recurrent formative assessments by faculty that are timely, substantive, and supportive of student self-reflection and growth
- Formative assessment and direct observation data that inform summative assessments
- Timeliness of faculty submission of final assessments/grades for student review
- Access to one's own academic record, with timely notification of any components that might negatively impact academic progress

Opportunities for learner evaluation of faculty, staff, and programs, such that:

- Systems are in place to prevent overburdening of students with evaluation requests
- Systems protect the anonymity of learners by providing evaluations of faculty and programs

[7] Functions and Structure of a Medical School. Standards for Accreditation of Medical Education Programs Leading to the MD Degree. 10.3 Policies Regarding Student Selection/Progress and Their Dissemination

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IV. Learning Environment

With regard to the learning environment, medical students have the right to:[8]

- Designated spaces that are conducive to learning and wellness;
- Learn in supportive, psychologically and physically safe environments in which medical students are welcomed as adult learners and collaborative members of teams;
- Structures, processes, and facilities that actively and equitably support student diversity, inclusion, and belonging;
- Protection from assigned clerical or other duties that interfere with educational opportunities and clinical education;
- Resources to support scholarly activities, including financial support and educational time or leave to attend professional meetings.
- Access to written policies that define mistreatment and educational activities aimed at preventing mistreatment.

Resources and processes for documenting concerns and deviations from standards that:[9]

- students are able to choose to report anonymously, except in situations where health or safety or other legal statutes are in place that would dictate otherwise;
- systems are in place to protect students from retribution from reporting;
- systems are in place to ensure that reporting is reviewed by medical school leadership in a timely and responsive manner.

[8] Functions and Structure of a Medical School. Standards for Accreditation of Medical Education Programs Leading to the MD Degree. Standard 5.

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**Arizona Medical Students’ Bill of Rights**

V. Workload

With regard to educational and clinical workload hours, medical students have a right to:

Be informed by their institution regarding processes in place for the development and implementation of policies regarding how much time students are to spend in required activities, including the total hours spent in clinical and educational activities during clerkships.[10]

Have proactive monitoring and communication conveyed on their behalf regarding external site breaches of work hour policies, with protection from negative impacts to student grades regarding student adherence to work hour restrictions.[11]

VI. Wellness

With regard to wellness, medical students have the right to:

Accommodations to support time away for physical and mental healthcare needs (eg, appointments, recovery time from illness/injury), and periods of leave as needed (maternity/paternity leave, FMLA)[12]-[13]

Accommodations to support space for sleep in relevant situations such as:
- during overnight shifts
- after overnight shifts or in situations where sleep deprivation may adversely affect safety in driving home immediately following a shift

Access school-supported, physical and mental health services according to the Liaison Committee on Medical Education (LCME) or Commission on Osteopathic College Accreditation (COCA) specifications;[14]-[15]

[10] Functions and Structure of a Medical School. Standards for Accreditation of Medical Education Programs Leading to the MD Degree. Standard 8.8 Monitoring Student Time.
[14] Functions and Structure of a Medical School. Standards for Accreditation of Medical Education Programs Leading to the MD Degree. Standard 12.

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VII. Academic Progress

With regard to processes with impact on academic progression, medical students have the right to:

Be provided support and guidance on options available for representation regarding academic progression.[16]

Be provided with processes to appeal decisions that impact academic progression.[17],[18],[19]

VIII. Governance

With regard to medical education governance, medical students have the right to:

Participate in committees and other decision-making structures that directly impact the quality and effectiveness of their medical education.[20]-[21]

Have representation from a Student Government entity that acts as a liaison between faculty leadership, deans, and the student body.[22]

Be informed regarding existing governing policies, any substantial changes, and anticipated impact.