I. POLICY

Preparation for a career in medicine demands the acquisition of a large fund of knowledge and a host of special skills. It also demands the strengthening of those virtues that undergird the doctor/patient relationship, and sustain the profession of medicine as a moral enterprise. This Compact serves both as a pledge and as a reminder to teachers and learners that their conduct in fulfilling their mutual obligations is the medium through which the profession inculcates its ethical values.

Guiding Principles

- **Duty**: Medical educators have a duty not only to convey the knowledge and skills required for delivering the profession’s contemporary standard of care, but also to inculcate the values and attitudes required for preserving the medical profession’s social contract across generations.

- **Integrity**: The learning environments conducive to conveying professional values must be suffused with integrity. Students learn enduring lessons of professionalism by observing and emulating role models who epitomize authentic professional values and attitudes.

- **Respect**: Fundamental to the ethic of medicine is respect for every individual. Mutual respect between learners, as novice members of the medical profession, and their teachers, as experienced and esteemed professionals, is essential for nurturing that ethic. Given the inherently hierarchical nature of the teacher/learner relationship, teachers have a special obligation to ensure that students and residents are always treated respectfully.

Commitments of Faculty

- We pledge our utmost effort to ensure that all components of the educational program for students and residents are of high quality.
- As mentors for our student and resident colleagues, we maintain high professional standards in all of our interactions with patients, colleagues, and staff.
- We respect all students and residents as individuals, without regard to gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who manifests disrespect or who expresses biased attitudes towards any student or resident.
We pledge that students and residents will have sufficient time to fulfill personal and family obligations, to enjoy recreational activities, and to obtain adequate rest: we monitor and, when necessary, reduce the time required to fulfill educational objectives, including time required for “call” on clinical rotations, to ensure students’ and residents’ well-being.

In nurturing both the intellectual and the personal development of students and residents, we celebrate expressions of professional attitudes and behaviors, as well as achievement of academic excellence.

We do not tolerate any abuse or exploitation of students or residents.

We encourage any student or resident who experiences mistreatment or who witnesses unprofessional behavior to report the facts immediately to appropriate faculty or staff: we treat all such reports as confidential, and do not tolerate reprisals or retaliations of any kind.

Commitments of Students and Residents

We pledge our utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty.

We cherish the professional virtues of honesty, compassion, integrity, fidelity, and dependability.

We pledge to respect all faculty members, and all students and residents as individuals, without regard to gender, race, national origin, religion, or sexual orientation.

As physicians in training, we embrace the highest standards of the medical profession, and pledge to conduct ourselves accordingly in all of our interactions with patients, colleagues, and staff.

In fulfilling our own obligations as professionals, we pledge to assist our fellow students and residents in meeting their professional obligations, as well.

II. PURPOSE

The principles and commitment of the faculty, students, and residents have been defined to maximize productivity and mutual responsibilities.
III. SCOPE

This policy applies to all NYULISOM faculty, residents, and medical students.

IV. DEFINITIONS: N/A

V. POLICY AUTHOR(S)
Office of Medical Education

VI. RELATED POLICIES
- Mistreatment
- Learning Environment
- Diversity and Inclusion

VII. PROCEDURE(S): N/A

VIII. REFERENCES
- LCME standard 3.4: Anti-Discrimination Policy: A medical school has a policy in place to ensure that it does not discriminate on the basis of age, disability, gender identity, national origin, race, religion, sex, sexual orientation or any basis protected by federal law.
- LCME standard 3.5: Learning Environment/Professionalism: A medical school ensures that the learning environment of its medical education program is conducive to the ongoing development of explicit and appropriate professional behaviors in its medical students, faculty, and staff at all locations. The medical school and its clinical affiliates share the responsibility for periodic evaluation of the learning environment in order to identify positive and negative influences on the maintenance of professional standards, develop and conduct appropriate strategies to enhance positive and mitigate negative influences, and identify and promptly correct violations of professional standards.
- LCME standard 3.6: Student Mistreatment: A medical school develops effective written policies that define mistreatment, has effective mechanisms in place for a prompt response to any complaints, and supports educational activities aimed at preventing mistreatment. Mechanisms for reporting mistreatment are understood by medical students, including visiting medical students, and ensure that any violations can be registered and investigated without fear of retaliation.
IX. TYPE OF POLICY: Academic

X. APPROVALS: Faculty Council, EPEC

XI. POLICY MANAGEMENT
Responsible Executive: Dean of the School of Medicine
Responsible Officer: Associate Dean for Medical Education
Responsible Office: Office of Medical Education