UC Riverside, School of Medicine Policies and Procedures Policy Title: Medical Student Research Policy Number: 950-06-016

Responsible Officer:	Director of Student Scholarly Activities
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Origination Date:	05/27/2021
Review Date:	08/01/2022
Date of Revision:	01/18/2024
Scope:	All UCR SOM Medical Students and Faculty

I. Policy Summary

This Policy Statement describes the School of Medicine policies and practices for providing medical students exposure to research experiences in laboratory Basic Science, Clinical, Medical Education, and Community-Based research settings. This is limited to the policies regarding providing access to different types of research experiences, and processes relevant to assessment of student performance in research settings.

It does not address inter-institutional relationships (e.g., affiliation agreements, liabilities) or other responsibilities; refer to specific policies in the Student External Research Policy (Policy #950-10-001) for additional details.

II. Definitions

- A. Basic Science Research Includes activities such as (but not limited to) 1), pharmacological, or physiological research, 2) computational, informatics, or OMICS analysis, 3) physics, chemistry, or other basic science research activity that contributes to the fundamental scientific understanding of human or animal physiology or disease.
- **B.** Clinical Research Includes research into translational, clinical, or health systems phenomena that occur in healthcare settings on human patients. These may include non-systematic studies such as case reports, or systematic studies requiring human subject approvals from the Office of Research Integrity.
- **C. Community-Based Research** Includes systematic investigations into the peri-clinical or extra-clinical experiences of human patients as they engage in efforts to promote health within their communities. These may include both participatory and non-participatory researcher roles.
- **D. Medical Education Research** Includes systematic research into continuing, graduate, or undergraduate medical or health sciences personnel in community, clinical, or classroom settings.
- **E.** Scholarly Activity –Includes academic activity such as 1) bibliometric, literature review, or other examinations of existing research, 2) activities that fall into Quality Improvement/Quality Assurance studies, or 3) medical humanities research.
- **F. Mentor** Mentors may include official or unofficial research support individuals such as faculty at other universities, health systems, or programs, or community faculty who may or may not be appointed to UCR for 50% of their FTE.
- **G. Sponsor** Sponsors include only individuals who are capable of sponsoring research projects under UC Riverside's Office of Research Integrity policies. These individuals must have a faculty appointment at UCR of at least 50% FTE per UCR Policy #527-3.

III. Policy Text

- A. The Undergraduate Medical Education curriculum in the UC Riverside School of Medicine is based in large part on the principle of "evidence-based practice" and this is emphasized by providing educational experiences that highlight this principle.
 - 1. Evidence-based practice builds on an ongoing process of research to understand disease mechanisms, identify therapeutic targets, develop safe and effective therapeutic strategies, as well as an understanding of other factors affecting patient wellness and clinical outcomes, including healthcare delivery systems, social determinants of health, and issues of social and racial equity.
 - 2. The policy described here is focused on the School of Medicine's approach to providing formally organized research experiences as part of the undergraduate medical education curriculum, and its contribution to establishing a culture of evidence-based practice.

IV. Responsibilities

An underlying principle in providing research opportunities for medical students must be that the priority for students engaged in the research is to have rewarding experiences that provide insights into the principles of the scientific method, training in ethical and responsible conduct of research, especially as it pertains to human subjects research, and the translation of research results to application in clinical practice, based on principles of social equity.

A corollary to the underlying principle is that the research experience must be in an environment that assures the student's personal safety, that the student is treated with respect, and not exploited as an uncompensated labor force.

V. Procedures

- A. Starting with initial entering student orientation, all students will be provided with information on research opportunities available throughout the four-year curriculum. The School of Medicine website will maintain a webpage listing medical student research opportunities, along with available support resources, and contacts.
- **B.** All students are required to take the basic Human Subjects training (provided through CITI) in the first year of medical school, and they must submit their certificate of completion of the training. The choice of any additional specialized modules is on the student's option. Since the certification is valid for three years, a renewal of the training is also required during the third year. Additional coursework on ethical human subjects research may be included in the curriculum.
- **C.** All students are required to proactively seek IRB approval of projects that may meet the definition of human subjects research, and to identify sponsors who are capable of supporting their applications to the IRB. Students who do not receive IRB approval (or a determination of non-human subjects status) for curricular or extra-curricular research projects before beginning these projects may be subject to disciplinary action.

VI. Forms/Instructions

Forms related to scholarly activities electives, programs, and events may be accessed through the Office of Student Scholarly Activities (OSSA).

VII. Related Information

Research support services are made available to students, including Human Subjects protocol IRB navigation, and biomedical statistics consulting.

VIII. Revision History Original – May 27, 2021 Reviewed (no revisions) – August 01, 2022 Revised – January 18, 2024	
Approvals: Medical Education Integration Subcommittee (01/16/2024) Medical Education Committee (01/18/2024)	
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