

BAYLOR COLLEGE OF MEDICINE GENETIC COUNSELING TRAINING PROGRAM GRADUATE STUDENT MANUAL 2023-2024

Manual Materials: Course overviews, thesis guidelines and clinical information.

As a student enrolled in the Baylor College of Medicine School of Health Professions Genetic Counseling Program (GCP), you should be knowledgeable of the College's policies, rules, regulations, and administrative procedures that affect you. This Student Manual provides guidelines and policies for the GCP. Students are responsible for all the information presented in this manual.

While every effort has been made to verify the accuracy of information, Baylor College of Medicine reserves the freedom to change, without notice, degree requirements, curriculum, courses, teaching personnel, rules, regulations, tuition, fees, and any other information published herein. This publication is not to be regarded as a contract.

Further information can be obtained from personnel in the following offices:

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Baylor College of Medicine admits students of any race, sex, religion, marital status, sexual orientation, color, national or ethnic origin, disability, or age to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate based on race, sex, religion, marital status, sexual orientation, color, national or ethnic origin, disability, or age, in administration of its educational policies, admissions policies, scholarship and loan programs, athletic and other school-administered programs.

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Baylor College of Medicine

History: Baylor College of Medicine, a private medical school, was chartered by the State of Texas in 1900 and organized as the University of Dallas Medical Department, an independent, nonsectarian institution. In 1903, it became affiliated with Baylor University in Waco as Baylor University School of Medicine. The College moved to Houston in 1943 and became the nucleus of the Texas Medical Center. Baylor College of Medicine separated from Baylor University in 1969 and became an independent corporation.

Mission: Baylor College of Medicine is a health sciences university that creates and applies science and discoveries to further education, healthcare, and community service locally and globally.

Department of Molecular and Human Genetics

History: The Department of Molecular and Human Genetics (DMHG) was formally established in the early 1990s by Dr. Arthur L. Beaudet. Prior to its establishment, genetic activities began in the 1970s with the arrival of Dr. Tom Caskey and Dr. Arthur Beaudet from the NIH. Now under the leadership of Chairman, Dr. Brendan Lee, the DMHG is the largest and most integrated genetics department in the world with more NIH funded research than all other Genetics Departments nationally. The DMHG's tripartite mission integrates research, clinical affairs, and diagnostic lab medicine in all daily aspects.

Mission: Transforming Medicine with the Practice and Science of Genetics:
Our department integrates basic research in genetic and genomic mechanisms; translational research in disease models; clinical trials in rare and common genetic diseases; medical genetics care; and cutting edge genetic diagnostic services.

School of Health Professions

History: The Division of Allied Health Sciences began in 1976 as a component of Baylor College of Medicine's (BCM) Department of Community Medicine. In 1988, the Division was transferred to the Dean of Medical Education's Office. In 2004, the Academic Council approved the conversion of the Division to an independent School of Allied Health Sciences administratively positioned to answer directly to the Executive Vice President and Executive Dean of the College. Currently, the Dean answers directly to the Provost of the College. In April 2018, the BCM Board of Trustees voted to approve the change of the name from the School of Allied Health Sciences to the School of Health Professions (SHP).

Mission: To promote the well-being of the people of Texas and beyond by educating outstanding health professionals, providing quality health care services, and contributing to research to improve health professions education and health care delivery.

Accreditation: Baylor College of Medicine and the Genetic Counseling Training Program are accredited as follows:

Baylor College of Medicine is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award masters and doctorate degrees. Contact the

Commission on Colleges at 1866 Southern Lane, Decatur, GA 30333-4097, or call (404) 679- 4500 for questions about the accreditation of Baylor College of Medicine.

Baylor College of Medicine is legally authorized to grant degrees, and grant credits toward degrees, in the State of Texas by the Texas Higher Education Coordinating Board (P.O. Box 12788, Austin, TX, 78711, 512-427-6225).

The Genetic Counseling Program is accredited by the [Accreditation Council for Genetic Counseling](#) (ACGC). The program received full accreditation status in December of 2021 for the maximum allowable term of 8 years. Visit the College's [accreditation](#) page for information about other accrediting agencies that review Baylor College of Medicine's educational programs.

BAYLOR COLLEGE OF MEDICINE GENETIC COUNSELING PROGRAM

Welcome to the Genetic Counseling Program (GCP) in the School of Health Professions (SHP) at Baylor College of Medicine (BCM)! We are pleased that you have chosen to attend the BCM GCP.

This manual was created to provide you with general information about the Program, the DMHG, the SHP, and BCM. As you proceed through your Program and provide us with feedback on additional information to include that would be helpful for future classes. REFER TO THIS MANUAL AS NEEDED OVER THE NEXT TWO YEARS.

“**GENETIC COUNSELING** is the process of helping people understand and adapt to the medical, psychological and familial implications of genetic contributions to disease. This process integrates:

- Interpretation of family and medical histories to assess the chance of disease occurrence or recurrence.
- Education about inheritance, testing, management, prevention, resources, and research.
- Counseling to promote informed choices and adaptation to the risk or condition.”

National Society of Genetic Counselors, 2005; A new definition of Genetic Counseling: National Society of Genetic Counselors' Task Force report. National Society of Genetic Counselors' Definition Task Force, Resta R, Biesecker BB, Bennett RL, Blum S, Hahn SE, Strecker MN, Williams JL, J Genet Couns. 2006 Apr;15(2):77-83.

WHO ARE GENETIC COUNSELORS?

Genetic counselors are professionals who have specialized education in genetics and counseling and provide personalized education to individuals as they make decisions about their genetic health. Today, there are more than 5,400 certified genetic counselors. Genetic counselors have advanced training in medical genetics *and* counseling to interpret genetic test results, and to guide and support patients seeking more information about such things as:

- How inherited diseases and conditions might affect them or their families.
- How family and medical histories may impact the chance of disease occurrence or recurrence.

- Which genetic tests may or may not be right for them, and interpretation of their test results
- How to make the most informed choices about their healthcare

Many genetic counselors work in clinic or hospital settings, and often work with obstetricians, clinical geneticists, oncologists, and other doctors. Like physicians, genetic counselors can work in a variety of settings and provide different services. They may provide general care, or specialize in one or more areas, including:

- Prenatal and Preconception
- Pediatric
- Cancer
- Cardiovascular
- Neurology
- Research
- Industry/Laboratory

<http://www.nsgc.org/page/whoaregcs>

The role of genetic counselors is quickly expanding. We look forward to seeing how you will contribute to our growing field.

PROGRAM MISSION & VISION STATEMENTS:

Mission: The Baylor College of Medicine Genetic Counseling Program provides students a transformative education in genomic medicine and the practice of genetic counseling. The outstanding clinical, laboratory, and research faculty will empower graduates to be empathic professionals with effective critical thinking skills.

Vision: As leaders of genomic medicine integration, our graduates will serve as indispensable navigators of genetic service delivery.

Objectives:

Teaching

- Be equipped with the tools to meet the ever-changing demands of genomic medicine.
- Be familiar with the latest developments in genomic medicine and prepared to critically evaluate and implement these developments in their own practice.

Service

- Be empowered to engage with, and advocate for, the communities they serve.
- Contribute to the growth and development of the profession.

Research

- Develop the skills necessary to further research in genetic counseling and genomic medicine.

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OVERVIEW

During their graduate education in the GCP, students will learn the principles of genetic counseling and medical genetics and their application to clinical genetics healthcare. The

knowledge and clinical skills acquired will prepare you to function as a competent and empathic genetic counselor in a wide range of settings and roles. The curriculum of the Program has been designed to provide students with in-depth knowledge regarding principles of human and medical genetics, the psychosocial impact of genetic disorders, and the research process in genetic counseling. Students will obtain basic content through course work and learn to apply the information through clinical and laboratory rotations and the thesis project. In addition, students will gain experience through attendance and presentations in conferences, seminars, and journal clubs. All these activities will enable the student to meet the clinical competencies as outlined by the Accreditation Council for Genetic Counseling (ACGC).

REQUIREMENTS FOR THE MASTER OF SCIENCE DEGREE

The SHP offers a Master of Science degree in Genetic Counseling that requires 56 credit hours: 47 didactic and 9 clinical.

COURSE REQUIREMENTS

You **MUST** achieve a grade of B or above in all classes throughout the Program. A grade of C or less constitutes failing. Each course in the Program has specific requirements and evaluation processes. If any course grade is below a B, the student will be required to demonstrate his or her mastery of the material (for example, retaking the course and earning at least a B) as decided by the Program Director (PD) and the course director in order to successfully complete the Program. Please refer to the SHP handbook for details on remediation (Article 5.13.5:

<https://www.bcm.edu/education/school-of-health-professions/students-resources/student-handbook>). Additionally, each student must demonstrate appropriate development of clinical skills, professionalism, and competencies during rotations. Successful completion of all clinical rotations is required. The APD will closely monitor student progress. If there is a concern regarding academic performance, the Program leadership will work with the student to remedy such difficulties on a case-by-case basis through the process of academic intervention. Tutoring is available.

COMPREHENSIVE EXAMINATION

A comprehensive examination is given in the of spring semester of the second year for all students. The exam is comprised of three parts: a written section, a role play, and an oral section. A student must pass all three sections to meet Program graduation requirements.

- **Written:** The written section is a multiple choice and short answer examination that covers the didactic courses and clinical genetic counseling material covered during the GCP to be taken by all second-year students who have performed satisfactorily in all aspects of the Program. Portions of the exam are patterned after the certification examination given by the American Board of Genetic Counseling, but there is no intent to “teach to the board exam”.
- **Role Play:** Students will engage in a role play, which will allow them to demonstrate their psychosocial skills and genetics knowledge.
- **Oral:** This portion of the Comprehensive Exam allows students to further demonstrate their knowledge base of human and medical genetics and genetic counseling. The oral exam committee is composed of the Program Leadership and additional faculty. Students are given genetic counseling scenarios to discuss, asked general knowledge questions in any area of the curriculum and may be requested to clarify answers given in the written

examination.

Students must attain a score of 76% or above to pass the written examination. A Comprehensive Examination committee, composed of the Program Leadership and additional faculty selected by the PD and APD, will reach consensus on the student's performance on the role play and oral sections to determine if the student has passed these sections of the comprehensive examination.

If a student fails a section of the examination, the Program Leadership will provide opportunities for the student to rectify the deficiency (academic intervention), such as having the student take another written examination or repeat the oral or role play sections. Committee members may also decide that additional course or clinical work is necessary to meet the requirements of the Program. Students will have an exit interview with the PD and APD prior to graduation.

Thesis

The Master's Thesis Project is designed to develop the student's abilities to critically analyze and thoughtfully produce research in the field of genetic counseling. The project will contribute to evidence-based practice and best practices in genetic counseling and/or related field. Additionally, the project will prepare the graduate to participate in research while in clinical practice. The goal of the Master's candidate's thesis project is to produce a manuscript of publication quality for submission within a peer-reviewed journal although submission and publication is not a requirement for graduation.

Thesis project ideas are identified in the fall of the first year of the Program and must be approved by program leadership as well as the Thesis course directors in the spring of year one. The students will identify an area of interest, communicate with project mentors, design protocols, perform a literature search, conduct their research, collect, and analyze data, produce a written manuscript, defend their thesis, and present a poster to colleagues at Baylor College of Medicine. All students will receive training in the Institutional Review Board (IRB) submission process as a part of the thesis process.

Students will defend their completed thesis and participate in a poster colloquium in the second year. Please reference the Thesis Project Manual for additional information regarding the thesis process, timelines, and expectations.

MAXIMUM TIME ALLOWED

All the requirements for the master's degree must be completed within two consecutive years unless there is an excused leave of absence. Due to the nature of the clinical rotations, students are required to complete the didactic and clinical course work within the 21 months of the Program. However, if additional time is necessary to finish thesis work, the length of the student's course of study may need to be extended. A master's candidate who is enrolled in Thesis III may, with a written request ("Request for Extension" form located in the Thesis Project Manual) and approval of the thesis committee and the PD, receive an incomplete in the course and continue work on the thesis for up to four weeks after the graduation date without incurring additional tuition. A student who does not complete and successfully defend the thesis with the approved four-week extension will be required to pay tuition for an additional semester in order to continue work on the project. All requirements for graduation must be met within the additional semester for the degree to be conferred.

SUPPLEMENTARY ACTIVITIES

Students will have access to supplementary activities during their time at Baylor College of Medicine. A supplemental activities list is available to students via blackboard within Foundations of Genetic Counseling I and II. These activities range from journal clubs to community engagement opportunities. In the first year, each student is required to complete at least one supplemental activity. Students will provide a written summary about each of the required supplemental activities.

TEACHING/PUBLIC PRESENTATIONS: variable

Students will be expected to formally present topics of interest at various clinical genetics meetings throughout their training. Students may also have the opportunity to gain experience in presenting information regarding genetic counseling, the career of genetic counseling or some aspect of clinical genetics, to lay, student and/or professional audiences outside of the Program. Students will be asked to present as requests are received by the DMHG or the GCP.

Under the guidance of the PD, APD, and other genetic counseling faculty, the student will have an opportunity to prepare and give such talks. In some situations, materials for presentations may be provided to students to facilitate their presentations. Students are expected to work with faculty to design and collect evaluations of their presentations from participants, event organizers, and supervising genetic counselors, as suitable.

CURRICULUM

In the event social distancing restrictions are in place, some or all components of the course may be delivered through distance education.

Foundations of Genetic Counseling I

Course Number: GCFG 64001 DLECT

(Credits: 4, Fall)

Course Director: Daniel Riconda, MS, CGC

Course Description: This course is designed to provide students with the foundation on which to build the skills to be a successful genetic counselor. Students will explore contexts and situations in genetic counseling that practicing genetic counselors are likely to face. They will learn procedures for obtaining an accurate and relevant family history, constructing a pedigree, assessing modes of inheritance, making a diagnosis, determining risks, receive an introduction to psychosocial counseling issues and explore diverse counseling theories. The course will include an overview of the history of the profession to provide a framework for understanding the current state of the profession. Students will be introduced to practice areas within the profession through a four-week block covering prenatal, pediatric, adult, and cancer genetic counseling and will obtain foundational knowledge specific to these practice areas. The ACGC Practice Based Competencies will be introduced, and students will explore the role of genetic counselors in working with clients

through a combination of role-plays and standardized patient encounters.

Medical Genetics I

Course Number: GCMEG 63001 DLEOL

(Credits: 3, Fall)

Course Co-Directors: Lindsay Burrage, MD, PhD and Pilar Magoulas, MS, CGC

Course Description: This course is designed for genetic counseling students in their first year of training. This course provides an overview of fundamental principles of cytogenetics, molecular genetics, cancer genetics, population genetics, biochemical genetics, and skeletal genetics. This course will be taken in sequence with the Medical Genetics II with both live and pre-recorded lectures. This course will combine didactic lectures with case studies, problem sets, quizzes, and short presentations by the students to reinforce topics presented in the lectures. For example, there are three hours per week: One hour will be live, one hour will be video and one hour will be a combination of topic reviews, assignments, quizzes, and short presentations.

Embryology

Course number: GCEMB 62003 DLECT

(Credits: 2, Fall)

Course Director: Salma Nassef, MS, CGC

Course Description: This course is designed for genetic counseling students in their first year of training. Students will understand the basics of normal human development and will apply this knowledge to a comprehensive understanding of the anatomy of the newborn and adult. Additionally, this course provides a basis for explaining the etiology and process of developmental anomalies. It also introduces the treatment of patients with congenital anomalies and counseling options for families of affected individuals. This course will combine pre-recorded didactic lectures with case studies, quizzes, and clinical correlates to reinforce key concepts.

Health Behavioral Counseling

Course Number: HPHBC 62201 DLECT

(Credits: 1.5, Fall)

Course Number:62201

Course Directors: Beth Garland, PhD

Course Description: This course introduces counseling and behavioral science theories, skills, and tools to enhance learners' communication skills and understanding of the process of health behavior change. Behavior change stages and processes are introduced using the Transtheoretical Model and social learning theories, with a focus on applying Motivational Interviewing skills.

Learning activities include role play, observation of self-help support group sessions, simulated patient encounters, and critical reflection to help learners develop an intimate understanding of the process of change and increase empathy for patients attempting to change health behaviors.

Preparing for Genetic Counseling in Practice

Course Number: GCGCP 62001 DLECT

(Credits 2, Fall)

Course Co-Directors: Salma Nassef, MS, CGC

Course Description: This course is designed to provide students with a practical foundation in preparing for clinical participation in various practice areas. This hands-on course will build on didactic content learned from Foundations of Genetic Counseling I and serve as an applied course. Students will have the opportunity to practice chart review, interpretation of screening and testing reports, pedigree risk assessments, online risk models, simulated coordination of testing, application of practice guidelines in a clinical context, completion of requisition forms, and identification of genetic testing options based on insurance considerations. This practice-based exploration of clinical genetic counseling will equip students to participate in patient care on clinical rotations.

Research Methods in Genetic Counseling

Course Number: GCRGC 61001

(Credits 1, Fall)

Course Director: Sarah Scollon, MS, CGC

Course Description: This course will introduce students to the tools necessary to conduct clinical research studies in genetics and the foundations necessary for their thesis project. Students will discuss current topics significant to the field of genetic counseling and the roles of genetic counselors in the field of research. The course will explore how research designs including quantitative, qualitative, and outcomes research are utilized in the field of genetic counseling. Students will be introduced to the use of interview and survey techniques in genetic counseling research as well as the basics in obtaining research funding. Courses will be a combination of lecture, student discussion and presentation.

Journal Club I

Course Number: GCJOC 61001 DLECT

(Credit 1, Fall)

Course Co-Directors: Tanya Eble, MS, CGC and Lauren Desrosiers, MS, CGC

Course Description: This course covers a review of current literature relating to advancements in genetic counseling, including the risk, diagnosis, and management of genetic diseases. Through this course, students will be able to: 1) review published literature and summarize significant findings,

2) analyze and critically evaluate data from the literature, and 3) present relevant data to provide an overview of key findings published in the literature.

Clinical Practicum I*

Course Number: GCCLP 71001 CPRAC

(Credits 1, Fall)

Course Director: Salma Nassef, MS, CGC

Course Description: Each Clinical Practicum I through V introduces students to a new clinical training experience with the opportunity to observe cases in a variety of clinical settings. At each site, students observe cases one day per week on a rotating schedule under the supervision of genetic counselors or other medical staff. This is an opportunity for students to familiarize themselves with different components of the genetic counseling session, observe different counseling styles, and compare and contrast how different clinical sites operate. At the conclusion of the fall semester, students should be able to prepare for a case and to obtain a three-generation family pedigree. Additional skill acquisition may occur at the discretion of the clinical supervisors.

*Clinical Practicum I, II, IV, and V will each be completed at a different site, cumulatively to expose each student to the following four core specialty clinical services. Summer Practicum III is not intended as a core clinical specialty, as described in that course description. Most of the following sites are confirmed and await affiliation contracts pending the Baylor approval process for the MSGC educational program. A template for affiliation agreements has been approved by General Counsel and has been vetted by directors at several of these sites.

Proposed Clinical Practicum Sites:

Prenatal: Harris Health/Ben Taub Hospital; Texas Children's Pavilion for Women; Texas Children's community clinics (Sugarland, Katy, Woodlands, Northwest); Methodist Hospital; Fetal Center; The Center for Women and Children for the Texas Children's Health Plan; Consultagene Clinic

Pediatric: Texas Children's Hospital; The Center for Women and Children for the Texas Children's Health Plan; Texas Children's Woodlands; Texas Children's West Campus

Adult (also Cancer): Harris Health/Smith Clinic; VA; McNair, Consultagene Clinic

Cancer: Lester and Sue Smith Breast Center at Baylor College of Medicine

Outreach (samples: distant, out-of-state, or global practicum placements may be considered for advanced practicum students only on an individual basis, pending verification of state authorization and vetting by program leadership):

- The Children's Hospital of San Antonio

Foundations of Genetic Counseling II

Course Number: GCFG 63002 DLECT

(Credits: 3, Spring)

Course Director: Daniel Riconda, MS, CGC

Course Description: This course is designed to prepare students for their clinical rotations. Emphasis will be on learning to effectively communicate a broad spectrum of genetic concepts to patients. This includes communicating both orally and in writing information about genetic disorders, procedures, laboratory tests, and risks. Students will practice oral presentation skills and develop patient education aids, which they will use in directed role-plays. They will build upon the skills obtained in Foundations of Genetic Counseling I and will learn how to facilitate decision making, conduct psychosocial assessments, practice critical thinking, and employ ethical practice in genetic counseling. They will also build upon their initial introduction to prenatal, pediatric, adult, cancer, and laboratory practice areas.

Medical Genetics II

Course Number: GCMEG 63002 DLEOL

(Credits 3, Spring)

Course Director: Lindsay Burrage, MD, PhD & Pilar Magoulas, MS, CGC

Course Description: This course is designed for genetic counseling students in their first year of training. This course provides an overview of genetic disorders encountered in prenatal genetics, pediatric genetics, and adult genetics, as well as advanced topics in biochemical genetics. An emphasis will be placed on etiology, diagnosis, prognosis, differential diagnosis, and management of these disorders. This course will be taken in sequence with Medical Genetics I with both live and pre-recorded lectures. This course will combine didactic lectures with case studies, problem sets, quizzes, short presentations by the students, and direct patient and parent interaction to reinforce topics presented in the lectures. For example, there are three hours per week: One hour will be live, one hour will be video and one hour will include a combination of topic reviews, assignments, quizzes, and short presentations.

Ethical and Legal Issues in Human Genetics: Ethics

Course Number: GCELI 62000 DLECT

(Credit , Spring)

Course Director: Elizabeth Mizerik, MS, CGC and Abby Yesso, MS, CGC

Course Description: This course focuses on the legal and ethical issues in the practice of genetic counseling and clinical genetics. The NSGC Code of Ethics will also be explored and applied to clinical and research case scenarios. Through the exploration of topics such as eugenics, incidental findings through genetic testing including non-paternity and consanguinity, genetic privacy and GINA, and prenatal testing/PGT, students will begin to appreciate ethical considerations and ethical decision making within the scope of clinical practice.

Fundamentals in Epidemiology

Course Number: GCFEP 62000 DLECT

(Credits 2, Spring)

Course Co-Directors: Michael Scheurer, PhD & Austin Brown, PhD

Course Description: This course introduces the basic principles and methods of epidemiology, with an emphasis on critical thinking, analytic skills, and application to clinical practice and research. Topics include outcome measures, methods of adjustment, surveillance, quantitative study designs, and sources of data. The course is designed for professionals intending to engage in, collaborate in, or interpret the results of epidemiological research as a substantial component of their career.

Genetic Epidemiology and Population Genetics

Course Number: GCEPG 61000 DLECT

(Credits 1, Spring)

Course Director: Philip Lupo, PhD & Melissa Richards, PhD

Course Description: This introductory level course in genetic epidemiology will build upon the topics covered in foundations in epidemiology with a focus on the design of studies to identify disease-gene associations. The lectures concentrate on common study designs for genetic association studies, including case-control studies, cohort studies, and parent-offspring trios. There is a focus on epidemiologic approaches for genetic studies of non-Mendelian diseases, disease-gene associations, and maternal genetic effects. Students will learn about study design and data analysis through class lectures, independent readings, and related projects.

The objectives of this course are to provide the student with an understanding of complex genetic diseases; population genetics; common designs for studies of disease-gene association; and approaches for assessing maternal genetic effects. At the conclusion of the course, students will be able to design case-control and family-based studies to detect disease-gene associations and should have an understanding of the various statistical approaches that can be used to analyze the resulting data.

Thesis I

Course Number: GCTHE 81001 DLECT

(Credits 1, Spring)

Course Director: Sarah Scollon, MS, CGC and Rachel Franciskovich, MS, CGC

Course Description: This course will continue the work begun in Research Methods in Genetic Counseling. The course is designed to prepare students for submission of their thesis projects. This course will provide the framework for development of strong thesis projects from evaluation of ideas through execution of the project to publication of the data. Students will learn about writing human research protocols, obtaining informed consent, developing research projects, study design, and presentation of research in the form of abstracts and posters. Through this course, students will

present ideas and outlines of their thesis project for evaluation by their instructors and peers and will submit a protocol to the IRB for their thesis project. Thesis Advisory Committee members will be identified and thesis proposal will be presented to class and advisors for candidacy.

Psychosocial Practicum I

Course Number: GCPSP 62001 DLECT

(Credits: 2, Spring)

Course Co-Directors: Salma Nassef, MS, CGC; Patti Robbins-Furman, MPH, CGC; & Tammy Solomon, MS, CGC

Course Description: This course is designed to introduce and expand on various concepts pertaining to psychosocial aspects of a genetic counseling session. This will be a combined class incorporating both first and second-year genetic counseling students. Students will learn through didactic lectures, group discussion, role plays, interactive sessions, and reflective exercises. Through the exploration of topics such as ethics, cultural competency, difficult patients, and autonomy, students will be able to develop skills specific to clinical practice.

Journal Club II

Course Number: GCJOC 61002 DLECT

(Credit 1, Spring)

Course Co-Directors: Tanya Eble, MS, CGC & Lauren Desrosiers, MS, CGC

Course Description: This course covers a review of current literature relating to advancements in genetic counseling, including the risk, diagnosis, and management of genetic diseases. Through this course, students will be able to: 1) review published literature and summarize significant findings, 2) analyze and critically evaluate data from the literature, and 3) present relevant data to provide an overview of key findings published in the literature.

Clinical Practicum II (for site listings, see Clinical Practicum I, First-Year, Fall)

Course Number: GCCLP 72002 CPRAC

(Credits 2, Spring)

Course Director: Salma Nassef, MS, CGC

Course Description: Students will rotate through three clinical sites for 6-week blocks. During this semester students begin to take on additional case responsibilities. These responsibilities may include case preparation, including review of the medical records and literature, obtaining family, medical and pregnancy histories, providing inheritance counseling, presenting cases to the medical staff, participating in case conferences, and composing counseling letters.

Laboratory Course

Course Number: GCLAB 71000 DLELA

(Credits: 1, Spring I)

Course Co-Directors: Ning Liu, PhD, Nicole Owen, PhD, & Rob Rigobello, MS,LCGC

Course Description: This course is designed for genetic counseling students at the end of their first year of training. Through this course students will become familiar with current molecular, biochemical, and cytogenetic techniques. Additionally, through this course students will understand the basics of the role of a laboratory genetic counselor, processes to enhance communication with the laboratory, and the distinctive role of the diagnostic laboratory in patient care.

Clinical Practicum III (for site listings, see Clinical Practicum I, First-Year, Fall)

Course Number: GCCLP 72003 CPRAC

(Credits 2), Fall (June-July)

Course Director: Daniel Riconda, MS, CGC & Salma Nassef, MS, CGC

This rotation provides students with extensive clinical training and increasing case responsibilities. The students participate in a (minimum) 5-week full-time practicum. The internship can be in or outside of the state of Texas for students in good standing pending student interest and clinic site availability. Summer Practicum III provides students with the opportunity to train in varied geographic settings, to work with novel patient populations, and to pursue individual clinical interests.

Advanced Genetic Counseling I

Course Number: GCAGC 62001 DLECT

(Credits: 2, Fall)

Course Director: Daniel Riconda, MS, CGC

Course Description: This course continues the work begun in Foundations of Genetic Counseling I and II. This course includes a discussion of the current state of the genetic counseling profession with a focus on current professional issues, including issues such as professional development, standards of practice, expanded roles of genetic counselors and cultural competency. The course will facilitate the continued development of presentation skills as well as preparation for job searching and interviewing. Working within interdisciplinary clinics and coordinating care with other health professionals will also be included in the instructional design of this course.

Thesis II

Course Number: GCTHE 83002 DRESR

(Credits: 3, Fall)

Course Directors: Rachel Franciskovich, MS, CGC

Course Description: The MSGC Program in Genetic Counseling requires completion of a research thesis. This course will continue the work begun in Research Methods in Genetic Counseling & Thesis I. Students will gather data related to their IRB approved graduate level research project

developed in Thesis I under the supervision of a thesis advisory committee. Students will begin data analysis of their IRB approved graduate thesis project developed. The experience will be structured such that students are expected to meet with their primary thesis advisor at least once a week and the full advisory committee at least once a month for the purposes of ongoing project oversight, implementation, data analysis and interpretation of results, and summarizing results.

Health Behavioral Counseling II

Course Number: GCHBC 61202 DLECT

(Credits: 0.5, Fall)

Course Number:61202

Course Directors: Beth Garland, PhD & Daniel Riconda, MS, CGC

Course Description: This course is a follow-up to HPHBC 62201. The course includes genetic counseling case-based application of motivational interviewing counseling skills. Students will also use case reflections to self-assess opportunities for use of MI skills including equipoise, emphasizing autonomy, and a review of skills from the HPHBC 62201 course. In addition, the concepts of shared decision making, transference and countertransference will be explored.

Journal Club III

Course Number: GCJOC 61003 DLECT

(Credit 1, Fall)

Course Co-Directors: Tanya Eble, MS, CGC & Lauren Desrosiers, MS, CGC

Course Description: This course covers a review of current literature relating to advancements in genetic counseling, including the risk, diagnosis, and management of genetic diseases. Through this course, students will be able to: 1) review published literature and summarize significant findings, 2) analyze and critically evaluate data from the literature, and 3) present relevant data to provide an overview of key findings published in the literature

Variant Interpretation and Counseling

Course Number: GCVIC 62000 DLECT

(Credits 2, Fall)

Course Director: Linyan Meng, PhD & Patricia Ward, MS, CGC

Course Description: Gene and variant curation assists the healthcare provider to assess and classify the role of a sequence variant or copy number variant found in a gene and the potential role of the variant in a disease. In this course, students will learn the process of variant classification in laboratory result interpretation. This course is designed to provide students with the foundation of variant interpretation including ACMG guidelines, skills to assess various types of evidence, and to utilize databases and other resources to aide in the variant classification. Genetic counseling

students will be assigned projects utilizing these resources and will learn to critically review laboratory data from exome sequencing, gene panel sequencing, and other genetic testing methodologies and curate these data for report interpretation. Students will also be introduced to bioinformatics resources and how they can be used to inform genetic testing methodologies and reporting.

Clinical Practicum IV (for site listings, see Clinical Practicum I, First-Year, Fall)

Course Number: GCCLP 72004

(Credits 2, Fall (August-December))

Course Director: Salma Nassef, MS, CGC

Course Description: Students will rotate through two eight-week blocks each semester. During this semester students will take on full cases including case preparation, counseling the full session, test coordination, and follow-up as needed. Through this rotation and with continuation into clinical practicum V, the students will rotate through the three main specialties (prenatal, pediatric, and adult).

Advanced Genetic Counseling II

Course Number: GCAGC 62002 DLECT

(Credits: 2, Spring)

Course Director: Daniel Riconda, MS, CGC

Course Description: This course focuses on advanced topics within the profession of genetic counseling. It will provide the framework for discussion and understanding of such topics as licensure, insurance, billing and reimbursement for services, supervision, compassion fatigue and burnout, transitioning from student to practitioner, board exam preparation, expand on interprofessional engagement, developing leadership skills genetic counseling outcomes, advanced degrees, and specialty practice related issues within the practice of genetic counseling.

Psychosocial Practicum II

Course Number: GCPSP 62002 DLECT

(Credits: 2, Spring)

Course Co-Directors: Salma Nassef, MS, CGC; Patti Robbins-Furman, MPH, CGC; & Tammy Solomon, MS, CGC

Course Description: This course is designed to introduce students to concepts pertaining to psychosocial aspects of a genetic counseling session. This will be a combined class incorporating both first and second-year genetic counseling students. Students will learn through didactic lectures, group discussion, role plays, interactive sessions, and reflective exercises. Through the exploration of topics such as ethics, cultural competency, difficult patients, and autonomy, students will develop skills specific to clinical practice.

Thesis III

Course Number: GCTHE 83003 DRESR

(Credits: 3, Spring)

Course Co-Directors: Rachel Franciskovich, MS, CGC

Course Description: The experience will be structured such that students are expected to meet with their primary thesis advisor at least once a week and the full advisory committee at least once a month for the purposes of ongoing project oversight, implementation, data analysis and interpretation of results, and summarizing results. Students will prepare manuscript and/or abstract for submission to a reputable national journal or national conference. In addition, they will orally present their dissertation in an open colloquium and then participate in a closed oral defense after their presentation with their thesis advisory committee.

Journal Club IV

Course Number: GCJOC 61004 DLECT

(Credit: 1, Spring)

Course Co-Directors: Tanya Eble, MS, CGC & Lauren Desrosiers, MS, CGC

Course Description: This course covers a review of current literature relating to advancements in genetic counseling, including the risk, diagnosis, and management of genetic diseases. It also includes attendance at genetics case conferences at least twice a month. Through this course, students will be able to: 1) review published literature and summarize significant findings, 2) analyze and critically evaluate data from the literature, and 3) present relevant data to provide an overview of key findings published in the literature.

Clinical Practicum V (for site listings, see Clinical Practicum I, First-Year, Fall)

Course Number: GCCLP 72005 CPRAC

(Credits 2, Spring)

Course Director: Salma Nassef, MS, CGC

Course Description: This rotation is a continuation of the Clinical Practicum IV course. Students will rotate through two 8-week blocks in this semester. The first block will be in one of the core specialties (prenatal, pediatric, and adult). During this semester students will take on full cases including case preparation, counseling the full session, test coordination, and follow-up as needed. The second block will be reserved for their desired specialty, remediation and/or academic intervention if needed, and/or a specialty rotation.

FALL YEAR 1

Course* identifiers	Course ** number	Course Name	Credits	Term
HPHBC	62201	Health Behavioral Counseling I	1.5	3
GCFGC	64001	Foundations of Genetic Counseling I	4	3
GCMEG	63001	Medical Genetics I	3	3
GCGCP	62001	Preparing for Genetic Counseling in Practice	2	3
GCEMB	62003	Embryology	2	3
GCRGC	61001	Research Methods in GC	1	3
GCJOC	61001	Journal Club I	1	3
GCCLP	71001	Clinical Practicum I	1	3

Total credits = 15.5

SPRING YEAR 1

Course* identifiers	Course ** number	Course Name	Credits	Term
GCFGC	63002	Foundations of Genetic Counseling II	3	1
GCMEG	63002	Medical Genetics II	3	1
GCELI	62000	Ethical and Legal Issues in Human Genetics: Ethics	2	1
GCFEP	62000	Fundamentals in Epidemiology	2	1
GCEPG	61000	Genetic Epidemiology and Population Genetics	1	2
GCTHE	81001	Thesis I	1	1
GCPSP	62001	Psychosocial Practicum I	2	1
GCJOC	61002	Journal Club II	1	1
GCCLP	72002	Clinical Practicum II	2	2
GCLAB	71000	Laboratory Course	1	2

Total credits = 18

FALL YEAR 2

Course* identifiers	Course ** number	Course Name	Credits	Term
GCCLP	72003	Clinical Practicum III (Summer)	2	1/2
GCAGC	62001	Advanced Genetic Counseling I	2	2
GCTHE	84002	Thesis II	3	2
GCJOC	61003	Journal Club III	1	2
GCVIC	62000	Variant Interpretation and Counseling	2	2
GCCLP	72003	Clinical Practicum III (June-July)	2	2
GCHBC	61202	Health Behavioral Counseling II	0.5	2

Total credits = 12.5 (including summer rotation)

SPRING YEAR 2

Course* identifiers	Course** number	Course Name	Credits	Term
BCMGCP				

Revised 07.2023

GCAGC	62002	Advanced Genetic Counseling II	2	1
GCPSP	62002	Psychosocial Practicum II	2	1
GCTHE	84003	Thesis III	3	1
GCJOC	61004	Journal Club IV	1	1
GCCLP	72005	Clinical Practicum V	2	1

Total credits = 10

Total credit hours = 56

*SHP assigns each course a 5-character alphabetic code reflecting the school (HP) or Program with which it is affiliated (GC) and its content.

** Each course is assigned a 5-digit numeric designation. The first digit reflects the course level. 6xxxx = basic science courses; 7xxxx = clinical science courses; 8xxxx = specialized or other higher-level courses. Second digit reflects the number of semester hours awarded for successful completion. Third through fifth digits are unique numbering for each Program to use in clustering its courses.

EXAMINATIONS

The GCP examinations are administered through ExamSoft, a cloud-based exam management tool. All students are required to have a laptop computer that can be used for electronic examinations. Certain types of exams may also be administered on paper, using standardized patient simulations, or as oral exams, as appropriate.

The following policies must be observed for all exams:

- All personal belongings (backpacks, purses, tablets, cell phones, smart watches, calculators, scratch paper, pens/pencils, etc.) must be placed at the front of the room.
- Remote exams will be given via ExamSoft with Exam Monitor, a secure monitoring software (virtual test proctor).
- The examination **MUST** be completed within the allotted time. Incomplete exams will be evaluated and scored as is.
- For onsite exams, students may leave the room to use the restroom with proctor permission; however, no additional time will be allowed to finish the exam. If the exam is being given via ExamSoft, a student may need a resume code from the proctor to restart the exam. Only one student may leave the room at a time.
- For remote exams, students should remain in the room throughout the entirety of the exam. Excessive movement may be flagged by the Exam Monitor software.
- Students should answer each question to the best of their abilities, being sure to follow all instructions.
- For onsite exams, scratch paper and pencils will be provided. For remote exams, students must display their blank scratch paper to camera at the start of the exam and again before submitting the exam. Students may write notes on the scratch paper, however, only answers uploaded into ExamSoft (or paper exam) will be counted toward the student's grade. The scratch paper and pencils must be returned to the proctor at the end of the exam.
- Students may use the calculator available through ExamSoft. Students may not use any other calculator or similar device.
- After finishing an exam in ExamSoft, click the "exit/save" button on the tool bar and then close the exam. When prompted, select "exit and upload." A green screen indicates that the

student has successfully uploaded the exam. Students MUST show the green screen to the proctor in order to be dismissed from the classroom.

- Any suspected unethical behavior during the exam will result in immediate uploading of the exam and a grade of zero.
- The College recognizes honesty and integrity as essential to the academic functions of the College. The following rules are promulgated in the interest of protecting the validity of the College's grades and degrees, and to assist students in developing standards and attitudes appropriate to academic life and the practice of health care. Violation of academic rules can result in dismissal from the College.
- No student shall receive assistance not authorized by an instructor in the preparation of any assignment, laboratory exercise, report, or examination submitted as a requirement for an academic course or rotation.
- No student shall knowingly give unauthorized assistance to another student in such preparation.
- No person shall sell, give, lend, or otherwise furnish to any unauthorized person material that can be shown to contain the questions or answers to any examination to be given at any subsequent date, in any course of study offered by the College, excluding questions and answers supplied by the department for the purpose of review.
- Any persons taking, or attempting to take, steal, or otherwise procure in any unauthorized manner any material pertaining to the conduct of a class, including examinations, laboratory equipment, etc., shall be in violation of this regulation.
- Students can be disqualified from taking or continuing to sit for an exam and/or be dismissed from Baylor College of Medicine if the College, at its sole discretion, determines through any reasonable method such as observation or testimony by eyewitnesses, including but not limited to, any of the following forms of academic dishonesty including:
 - Cheating,
 - Plagiarism without proper citation,
 - Unauthorized disclosure of test questions to other students, or
 - Unauthorized disclosure of test answers to other students

DIDACTIC GRADES

Students are required to score 76% or higher on each individual course module within the School of Health Professions. See page 32 for details regarding remediation.

The grading scale will be as follows:

Grade	Score Range	Quality Points	Interpretation
A	90 – 100	4.0	Exceptional performance
B	76 – 89	3.0	Performance meeting expectations
C	70 – 75	2.0	Unsatisfactory performance (failure)
D	65 – 69	1.0	Unsatisfactory performance (failure)
F	0-64	0.0	Unsatisfactory performance (failure)

LATE SUBMISSIONS

All assignments are due by the stated due date and time or when specified by the course director. Assignments received after this time are considered late. In special circumstances, course directors may grant extensions for assignments. A student who wishes to apply for an extension should contact the course director immediately to discuss his or her circumstances. Assignments submitted after the due date and without an agreed upon extension will be penalized as follows: a 10% penalty for the first day after the missed deadline and a subsequent 5% penalty per day for the next six calendar days after the due date (including Saturdays and Sundays). No assignments will be accepted more than seven calendar days past the due date except in exceptional circumstances and in consultation with the course director.

FIELDWORK PLACEMENTS

Description

Students will be oriented at each institution where they have a clinical rotation by the supervising genetic counselors at the time of their rotations. Institutional services, expectations, roles, and responsibilities will be addressed in detail at that time.

Students must satisfactorily complete all rotations of clinical practicum. Rotations include the following areas: Prenatal Genetics, Pediatric Genetics, Adult Genetics, Cancer Genetics, and Specialty Clinics.

Clinical Practicum I is comprised of observational clinical rotations in the first semester that introduce students to a variety of clinical settings. At each site, students observe cases one half day per week on a rotating schedule (three 5-week rotations) under the supervision of genetic counselors or other medical staff. This is an opportunity for students to familiarize themselves with different components of the genetic counseling session, observe different counseling styles, and compare and contrast how different clinical sites operate. By the end of Clinical Practicum I, students are expected to have taken one full pedigree in clinic.

Clinical Practicum II in the spring semester, students will rotate through three clinical areas (prenatal, pediatric, and adult) for 5-week blocks. During this semester students begin to take on additional case responsibilities as they attend clinic 1-1.5 days per week. The first week on a given rotation, students will observe cases. By the third week, students should be taking pedigrees and intakes and beginning to explain basic genetic concepts, with the goal of actively participating in sessions by the end of the rotation.

Summer Practicum III provides students the opportunity to train in varied geographic settings, to work with novel patient populations, and to pursue individual clinical interests. This rotation provides students with extensive clinical training and increasing case responsibilities. Over the summer, students participate in a five-week full time practicum (up to 200 hrs.). The placement can be in or outside of the state of Texas for students in good standing pending student interest and clinic site availability and approval (vis a vie an executed affiliation agreement). The goal of the summer rotation is to allow students to get a sense of practicing as a full-time genetic counselor.

In Clinical Practicums IV students will rotate through two seven-week blocks each semester. During this semester students will take on full cases including case preparation, counseling

the full session, test coordination, and follow up as needed as they attend clinic 2-3 days per week. In Clinical Practicum V students will rotate through one seven-week block and a four-week elective rotation (for students in good standing).

The specific rotation schedule for each student will be assigned by the APD in advance of your first day at the clinical site.

Each clinical rotation will provide students with opportunities to have first-hand experience with individuals and families affected by a broad range of genetic disorders. The intent of each rotation will be to expose students to the natural history and management of common genetic conditions and birth defects and to the relevant psychosocial issues involved in each case. During these clinical experiences students will be required to observe and practice a range of genetic counseling functions, including preparing for cases; obtaining medical and family histories; assessing and explaining risks; performing psychosocial assessments; communicating information about disease characteristics, inheritance, and natural history; providing anticipatory guidance and supportive counseling; identifying and using medical and community resources; communicating information to other health care professionals; and case management and follow-up.

The rotation sites include:

- Prenatal: Harris Health/Ben Taub General Hospital; Texas Children's Pavilion for Women; TCH community clinics (Sugarland, Katy, Woodlands, Northwest); Methodist Hospital; Fetal Center; The Center for Women and Children for the Texas Children's Health Plan (Greenspoint and Southwest); Consultagene Clinic
- Pediatric: Texas Children's Hospital (TCH) Main campus; The Center for Women and Children for the Texas Children's Health Plan; TCH Woodlands; TCH West Campus
- Adult (including Cancer): Harris Health/Smith Clinic; VA; McNair
- Cancer: Dan L Duncan Comprehensive Cancer Center; Consultagene Clinic
- Electives (during the spring semester of the second year): Industry & specialty rotation options
- Outreach (samples: distant, out-of-state, or global practicum placements may be considered for advanced practicum students only on an individual basis, pending verification of state authorization and vetting by Program leadership):

FIELDWORK PLACEMENT GRADING

Grading is on an A, B, and F basis except for Clinical Practicum I which is pass/fail. Successful completion of EACH fieldwork placement is required to graduate from the program. Students will receive a mid-point and end-point evaluation for each rotation starting in the spring of the first year. Evaluations will be discussed face to face with the student and available for review by the student and Program Leadership through the Typhon system. Evaluations are mapped to practice-based competencies to ensure that students are advancing throughout their rotations. Specific requirements for fieldwork placements include, but are not limited to, preparing for cases weekly (chart review, literature search on appropriate topics pertaining to each case, obtaining additional information such as lab data and hospital records), and meeting with the clinical supervisor prior to each case at a time agreed upon by the student and the counselor to

discuss counseling issues and strategies. In addition, the student may be asked to prepare a pre-case counseling outline and write-up. The pre-case write-up will be the basis for case review and discussion with the supervising clinician. These may be required prior to seeing the patient for the student to see the case.

Following each case, clinic notes, letters, post-case write-ups, and other additional information requested must be submitted in a timely manner.

Failure to meet expected deadlines for case write-ups, letters, etc. more than 3 times will result in mandatory remediation and/or a failing grade for the rotation at the discretion of the Program Leadership. A student who does not perform satisfactorily and meet the requirements of the practice-based competencies will not receive a passing grade for the clinical placement. Consistent with the remediation and academic intervention processes outlined in the student manual, the Course Director for the clinical practicum will evaluate the student for areas of focused skill deficits, and if a single area of weakness is identified, the Course Director will develop a targeted academic intervention. If there are multiple deficiencies, the Course Director will report the original failing grade to the Program Director and Associate Program Director to begin a process of comprehensive remediation. Both targeted academic intervention and comprehensive remediation of clinical skills deficiencies will result in a written plan including required outcomes and a timeline. In the case of a targeted academic intervention, this plan will be signed by the student and the Course Director. In the case of a comprehensive remediation, the plan will be signed by the student, the Course Director, Program Director, and Associate Program Director. Academic interventions may include, but are not limited to, additional clinical work or use of simulation with faculty and/or standardized patients with a focus on an identified deficiency or deficiencies. In addition, the final fieldwork placement for a given student can be assigned by program leadership to address areas of weakness that have been identified through previous fieldwork placements.

PRACTICUM/ROTATION OBJECTIVES

The clinical practicum supports the development of practice-based competencies as outlined by the Accreditation Council for Genetic Counseling and represents practice areas that define activities of a genetic counselor. These competencies fall into the following domains: communication skills; critical-thinking skills; interpersonal, counseling, and psychosocial assessment skills; and professional ethics and values. During each rotation, students will be assessed on skills necessary for achievement of each competency as outlined in specific objectives.

By the end of each rotation, the student will demonstrate progress in the following competencies:

Case Preparation (PBC)

- Appropriate visual aids utilized (14)
- Reviews charts/medical records and research indication for referral (3)
- Can critically assess scientific literature for use in a genetic counseling session (7)

Contracting/Rapport Building (PBC)

- Establishes mutually agreed upon contracting / agenda (8)
- Establishes rapport with patient (9)

Family & Medical History (PBC)

- Obtains comprehensive and appropriate medical history (3)
- Constructs relevant, targeted, and comprehensive pedigree (3)

Genetic Expertise (PBC)

- Can demonstrate/utilize depth and breadth of understanding and knowledge of genetics and genomics core concepts and principles (1)
- Effectively educate patients about a wide range of genetic and genomic information based on their need, their characteristics, and circumstances (14)

Genetic Testing / Results (PBC)

- Identify, assess, facilitate, and integrate genetic testing options into genetic counseling practice (4)
- Accurately report results and explanation to patient (i.e., risk assessment versus diagnostic) (14)

Risk Assessment and Inheritance/Risk Counseling (PBC)

- Assess individuals' and their relatives' probability of conditions with a genetic component or carrier status based on their pedigree, test result(s), and other pertinent information (5)
- Provide the aforementioned information to the patient in an appropriate and customized manner. (14)

Follow-Up/Case Management Skills (PBC)

- Demonstrate skills necessary to successfully manage a genetic counseling case. (6)
- Presents case information clearly and concisely to medical providers involved (6)
- Provides appropriate support group/written info for patient (6)
- Coordinates referral to other specialists (6)
- Arranges for follow-up testing (6)
- Calls results to patient/referring physician (6)

Psychosocial Assessment and Counseling (PBC)

- Aware psychological and social issues of patient (10)
- Employ active listening and interviewing skills to identify, assess, and empathetically respond to stated and emerging concerns. (9)
- Use a range of genetic counseling skills and models to facilitate informed decision-making (10)
- Applies skills in culturally responsive and respectful manner to all clients (13)
- Recognizes the need for intervention and referral (2)

Advanced Counseling Skills (PBC)

- Promote client-centered, informed, non-coercive and value-based decision-making (11)
- Range of genetic counseling skills to adapt to genetic risks or conditions (10)
- Integrate knowledge of psychosocial aspects of conditions with genetic components to promote client well-being (2)
- Assesses patient understanding and modifies counseling session as needed (2)
- Demonstrates advanced critical thinking skills (11)

Written Case Reports (PBC)

- Write concise and understandable clinical and scientific information for audiences of varying educational backgrounds (15)

Interpersonal Skills/Professional Development (PBC)

- Acts in accordance with ethical, legal, and philosophical principles and values of the genetic counseling profession and policies of one's institution/organization (17)
- Delivers information to patients/providers in a professional/confident manner (20)
- Advocates for individuals, families, communities, and genetic counseling profession (19)
- Adapt skills for varied service delivery models (12)
- Accepts feedback in a productive and non-defensive manner (20)

- Demonstrates desire to learn material beyond the clinical experience (17)
- Able to identify professional strengths and weaknesses and a desire to improve and grow as a genetic counselor (20)
- Demonstrates self-reflective, evidence-based, and current approach including accepting successes and failures (20)
- Establish and maintain professional interdisciplinary relationships in both team and one-on-one setting, and recognized one's role in the larger healthcare system (22)
- Self-care: Addresses personal issues that may affect professional life and demonstrates desire for wellness and balance (20)

LOGBOOKS

Each student will maintain a logbook of **ALL** patients he/she sees **including all observations**. This log should include all information needed to satisfy documentation of the student's role in each case as well as detailed notes on the cases and counseling strategies. The logbook should reflect the depth and breadth of the student's clinical experience. The Typhon system will be the electronic logbook tracking system. Logbooks will be reviewed by the APD and lead rotation supervisor at the end of each clinical rotation, as well as by the supervisor involved with the case. Additionally, all student cases will be reviewed and must be completed to the satisfaction of the supervising genetic counselor, PD, and APD prior to the student leaving the Program.

Patient identifiers (such as patient hospital number) must never be used on the logbook. The Typhon system will auto assign a unique identifier for each case entered.

Specific expectations during each rotation for each clinical site will be given to the student prior to starting the rotation (see fieldwork placement manual). Students will receive a mid-point and end-point evaluation for each rotation. Evaluations will be discussed face to face with the student and available for review by the student and Program Leadership through the Typhon system. Evaluations are mapped to practice-based competencies to ensure that students are advancing throughout their rotations.

Each student, over the period of four semesters plus the summer, will be expected to obtain a minimum of 50 participatory fieldwork case and other materials documenting their clinical training. These materials become a permanent part of the student's portfolio, maintained in the Typhon management system, and will be collected by the PD prior to the student graduating the Program. In each clinical setting in which cases will be eligible to be included in their logbook, the student will have direct supervision by a certified genetic counselor. The student must complete a total of 9 credit hours of Clinical Practicum (1 credit in the fall of year one, 2 credits in the spring of year one, 2 credit hours in the summer; 2 credit hours in the fall of year two and 2 credit hours for the final spring semester). Students will review their logbooks and other materials before leaving BCM.

Finally, prior to starting each rotation, each student will identify specific goals that the student wishes to accomplish during that rotation. Students will continue to add and build upon the list of goals at the beginning of each new rotation and will review them with the supervising counselor(s) at the beginning and end of a rotation. It is anticipated that by the end of the Program, the students will have achieved the goals that they and Program faculty have set.

UNIVERSITY ACADEMIC CALENDAR, HOLIDAYS, AND VACATION

Graduate students in the SHP are officially registered for the entire year and as such are expected to dedicate full time to course work, clinical training, and study. Graduate students in the professional schools are subject to the SHP Calendar, which specifies the holidays they may observe each year. Thus, graduate students in the Genetic Counseling Training Program are expected to be present throughout the entire semester, regardless of whether classes, etc., are in session. Official holidays include Labor Day, two days at Thanksgiving, two weeks for Christmas/New Year's break, Martin Luther King Day, three days for spring break and July 4th.

Requests for excused absences based on religious observance, sick leave or medical or family emergencies will be considered on a case-by-case basis. Even if an excused absence is granted, the student will be responsible for completing all missed assignments, required classwork and examinations.

Vacation times will be planned and discussed with the appropriate clinical faculty or supervising genetic counselors, etc. At least one month's advanced notice is required. Final approval must be given by the PD & APD.

ATTENDANCE

Students are expected to attend all required conferences, classes, clinical assignments, and rotations, even when a rotation is off campus. If the student is ill or must miss a conference, class or clinical assignment, the student must contact the appropriate supervising genetic counselor, professor, or PD to notify them that they are ill. During clinical rotations, if a student misses more than 6 days, the student will be expected to make-up missed dates during a rotation as needed to avoid receiving a failing grade. All requests for excused absences must be made in writing and approved by the course director and Program leadership. If the student misses a significant portion of required attendance at clinical conferences or classes, the student may be asked to extend their course of study to make up deficiencies.

FINANCIAL AID

Each student is responsible for obtaining his or her own financial aid. The Office of Student Financial Aid supports the mission, vision, and values of Baylor College of Medicine, additional information can be found here: <https://www.bcm.edu/education/school-of-health-professions/tuition-and-fees>. The telephone number is 713-798-4603 and the email address is finaid@bcm.edu. Financial arrangements should be made by the time the student registers for each semester. Fall and spring semester tuition bills are sent directly to the student. BCM reviews tuition charges annually and reserves the right to change the amount of tuition and fees and/or to amend the method of charging tuition and fees without notice. Any changes in school tuition or fees will apply to all students enrolled in the school, regardless of the date of matriculation.

Other expenses include the Program-related fees and health insurance fees if the student does not have health insurance outside of the Program. Students who have alternate medical insurance may waive the Aetna Student Health Program fee each semester by completing a waiver form. Students are given the opportunity to waive out of the Aetna Student Health Program if their alternate coverage meets the BCM waiver criteria. A student may submit a waiver of coverage:

1. During the Annual Student Insurance Change Period

2. As an incoming student
3. As a result of a qualifying life event (birth, marriage, commencement of employment, etc.)

Billing for the Student Health Program is charged to the student's tuition bill and administered through the Student Account Services Office. For questions regarding health charges or due credits please contact their office directly.

Students may work part time if it does not interfere with Program requirements including didactic coursework and class times, clinical rotation responsibilities and thesis work. Students may contact the Office of Student Employment which assists students seeking part-time employment on and off campus during the academic year.

During the second year of training, students will be given up to a stipend to be applied to expenses incurred to attend the Annual Conference of the NSGC and/or TSGC. Documentation of expenses will be required.

STUDENT LOCKERS

Students will be assigned a combination locker while enrolled in the Program.

INTERNET

Each student at BCM receives free access to email services. Students will receive an ID number and directions for accessing the internet at home and this will be reviewed again during orientation. Moreover, the campus is wireless, so students should be able to access the internet from anywhere on campus if their laptops have wireless capability. Network security requirements for personal computers will need to meet guidelines established by the BCM IT security team (Acceptable Use policy):

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=12.2.01

NETIQUETTE

All communications in discussions boards, chat forums, and via other online tools should be composed with tact, fairness, and common courtesy. Students should keep in mind that communication cues, such as body language, tone, and expression, are absent in an online forum and, as a result, misunderstandings can occur. Students are encouraged to be cautious about the wording and tenor of all communication and to observe basic netiquette guidelines. All communications should represent graduate level grammar, spelling, and syntax.

All students have the right to appropriately express opinions in discussions and other online forums. Attempts to dominate a discussion by posting threads excessively, intentionally changing the discussion topic, exhibiting an inappropriate or argumentative attitude or other disruptive behavior will not be permitted.

For more information about online netiquette and the BCM social media policy, visit the following sites:

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=11.2.15

EMAIL COMMUNICATION

Students must use their BCM email accounts for all Program communication. When submitting questions or coursework via email, students should observe the instructor's guidelines regarding subject lines, attachment types, and file naming conventions. Instructors may request that students put the course name or course ID in the subject field, use a particular naming convention for attachments, or request assignments in a particular format or file type. Following these guidelines will help ensure efficient communication between instructors and students. Failure to comply with these guidelines may result in a delayed reply or misplaced coursework.

Prompt response to all communications (phone calls, emails, etc.) from supervisors, faculty, course directors, and program leadership is required. If you receive an email or phone call from any of the aforementioned individuals, you are expected to respond within 24 hours unless it is a Friday (a response within 48-72 hours would be expected).

TECHNICAL DIFFICULTIES

All students are encouraged to have a back-up plan for internet/computer access should they experience technical difficulties with their primary computer or internet service provider. If a student experiences technical difficulties (e.g., internet outage, power outage, weather-related issues) that prevent him or her from submitting an assignment, the student should contact the instructor immediately via phone or other communication method. The instructor will advise the student how to proceed with submitting the coursework. The GCP does have a laptop, which may be used for and exam with Exam Soft if advanced notice is given to the course director that your laptop is unavailable to provide adequate time for the download of the exam onto the laptop.

LIBRARY

Students have access to the TMC library. Most journals and texts useful to genetic counseling students can be found in either the TMC Library or online through the library. A complete set of the required textbooks for the Program are available to be signed out in the Program offices. Students may use the TMC library at any time. Books, journals, and reprints may NOT be removed, but copies may be made at the library. Other facilities will let the students know what reference materials they have access to during rotations.

STUDENT OFFICE SPACE AT ROTATION SITES

When possible, office space (cubicle area or other arrangement) has been made available to students when they are involved in clinical rotations at the various institutions. Each genetics center will provide students with access to patient records and materials including computer access to on-line databases as appropriate. **NO PATIENT RECORDS ARE TO BE REMOVED FROM ANY GENETICS CENTER – NOR MAY ANY PATIENT DATA BE COPIED AND TAKEN OUT OF THE FACILITY.** Office space at the various institutions is very limited. Please do NOT use hallways or secretaries' office areas as gathering or meeting places. Students should **NEVER** telephone patients or discuss patient related matters in any public area (including elevators, lunchroom, etc.) other than those that have been designated by your supervisors. NO personal calls or texting should be made or received at your rotation site unless there is an emergency.

CONFIDENTIALITY AGREEMENTS AND HIPAA TRAINING

Students must sign Confidentiality Agreements with the various institutions prior to participating in any clinical activities including observations and clinic conferences. This is to preserve patient confidentiality. Under HIPAA guidelines, students may **NOT** copy or remove any patient records including the pedigree from any clinical site. All pre-case and post-case write-ups must have patient names, etc., blacked out.

PROFESSIONALISM AND DRESS CODE

Business casual attire and demeanor is expected when seeing patients in person **or remotely** or when otherwise engaging in professional activities at all clinical rotation sites. Students should always wear their student badges when involved in any patient situation. Check with the clinic regarding dress codes.

Dress in the department is casual and you may wear jeans and other casual clothing. If your clothes are felt to be inappropriate, you may be asked to leave and/or change.

Please address faculty formally as warranted by their academic or professional title (Dr., Professor, etc.) unless they instruct otherwise. In the clinical setting when seeing patients, **ALWAYS** address the faculty member formally. Also, be sure to ask the counselors how they would like to be addressed in a professional setting – many counselors do not use a nickname when seeing patients. Professionalism also includes how you interact with others in the classroom, the clinic or at any time you are on campus or representing the Program off the campus. As you will hear us say many times, “you are always on stage”.

While engaging in any classes that are delivered virtually (via Zoom or other means), you must have your video/camera on throughout the class unless otherwise instructed. Use of the chat function or muting/unmuting to ask the instructor(s) questions will be at the discretion of the course director. Your full attention and professionalism are expected during the allotted class time. Students should dedicate a space for classroom engagement. Lounging in bed, on a hammock, or lying on the floor are unacceptable. Distractions, such as loud background noise, pets, and cellphone usage, should be minimized during class times.

TEXTBOOKS

We have tried to keep required texts to a minimum. However, we highly suggest that students purchase or have available the following texts (approximately ~\$850). All these texts are used in the Program-related courses. The most economical is to purchase them online – where prices may be reduced. All the required texts will be available in the Program office and/or the TMC library. Required Books:

- Foundations of GC I & II
 - Uhlmann WR, Schuette JL, Yashar BM, A Guide to Genetic Counseling, 2nd. Ed., Wiley-Blackwell, 2009, ISBN 978-0470179659.
 - Bennett, RL, The Practical Guide to the Genetic Family History, 2nd Ed., March 2010, Wiley-Blackwell, ISBN: 978-0-470-04072-0, 386 pages.
 - Veach, P, LeRoy, B, and Bartels, D, (2021). Facilitating the Genetic Counseling Process: A practice manual. 2nd Ed., Springer., ISBN 978-3-319-74798-9
- Advanced GC I & II
 - LeRoy, B, McCarthy-Veach, P, and Callanan, N, Genetic Counseling

Practice: Advanced concepts and skills. 2nd Ed., Wiley-Blackwell, New York, 2021. ISBN- 13: 978-1119529859

- Research Methods in GC
 - MacFarlane, IM, Veach, P, LeRoy, B, Genetic Counseling Research: A Practical Guide, 2014, Oxford Univ Press, ISBN 978-0199359097
- Laboratory and Variant Interpretation and Counseling
 - Goodenberger, ML, Thomas, BC, & Kruisselbrink, T, (2017). Practical Genetic Counseling for the Laboratory (1st Ed.). S.l.: Oxford University Press. ISBN 978-0190604929
- Health Behavioral Counseling
 - Rollnick, S, Miller, W, & Butler, C, (2022) Motivational Interviewing in Health Care: Helping Patients Change Behavior (Applications of Motivational Interviewing), 2nd Ed. Guilford Press, ISBN: 978-1462550371

Not required but strongly recommended and referenced:

- Fundamentals in Epidemiology & Genetic Epidemiology and Population Genetics
 - Oleckno W, Essential Epidemiology: Principles and Applications, 1st Ed., 2002. Waveland Press. ISBN: 1577662164
 - Rothman, KJ. Epidemiology: An introduction. 2012. 2nd Ed. Oxford University Press. ISBN: 0199754551
- Embryology
 - Langman Medical Embryology Us Ed Pb, Sadler, Lippincott Williams&Wilkins ISBN 978-1-4511-1342-6
- Medical Genetics I & II
 - Nussbaum, McInnes, Willard (2015) Thompson and Thompson Genetics in Medicine, 8th Ed.; Saunders, ISBN10 1437706967
 - Saul, RA, (2013) Medical Genetics in Pediatric Practice; American Academy of Pediatrics, ISBN 978-1-58110-496-7

Other recommended texts:

- Kenneth Jones, editor. Smith's Recognizable Patterns of Human Malformations. 7th Ed. W.B. Saunders Company, Philadelphia, 2013. ISBN-10: 1437706967 \$80
- Robertson, D and Williams, GH, Clinical and Translational Science: Principles of Human Research, 2nd Ed., Elsevier (Academic Press), 2016; ISBN-13: 978- 0128021019 Clarke, Angus, Harper's Practical Genetic Counselling, Eighth Edition (new Ed in October 2019)
- William Reardon. The Bedside Dysmorphologist. Oxford University Press, New York, 2007. \$54 ISBN 978-0195300451
- Medical dictionary – any good medical dictionary is fine. \$30-\$40
- Schneider KA, Counseling About Cancer: Strategies for Genetic Counseling, 3rd Ed., Wiley-Liss, Inc. 2012, ISBN 978-0-470-08150-1.
- Young, ID, Introduction to Risk Calculation in Genetic Counseling. 3rd Ed., Oxford University Press, 2006. ISBN 978-0195305272
- Gardiner and Sutherland, Chromosomal Abnormalities and Genetic Counseling, Oxford Univ Press, 4th Ed. ISBN 978-0195375336

Optional texts

- Psychosocial Genetic Counseling. By Jon Weil. Oxford University Press, New York 10016, 2000, 297 pp. ISBN: 9780195120660
- Practical Genetic Counselling 8th Edition, Peter Harper (2020). ISBN: 9781444183740

Visual aids flip chart book is very helpful for role plays in these courses as well. Books needed for courses not listed above will be assigned by the instructors for those courses (Health Behavioral Counseling, Medical Ethics and Fundamentals of Epidemiology). See booklist.

ACADEMIC INTEGRITY – AI?

The importance of academic integrity cannot be over-emphasized. Throughout the course of their professional careers, genetic counselors are expected to maintain academic integrity. The SHP has prepared a detailed document about BCM's academic integrity policy (Regulations Concerning Conduct). It is the responsibility of each incoming student to read the SHP Student Handbook section on Regulations Concerning Conduct. The URL for this section of the Handbook is <https://www.bcm.edu/education/school-of-health-professions/students-resources/student-handbook>

College policy states, "Honesty and integrity are essential to the academic functions of the SHP." Anything a student writes, whether it is for a course, clinical rotation, or thesis document, must be entirely in their/your own words. Plagiarism is prohibited. Plagiarism includes "an act or instance of using or closely imitating the language and thoughts of another author without authorization and the representation of the author's words as one's own, as by not crediting the original author." (dictionary.com) Whether intentionally or unintentionally, making extensive use of sources without acknowledging them (including the internet) is interpreted as acts of plagiarism. Quotations, paraphrases and borrowed information must be properly referenced.

COPYRIGHT

All course materials, including online content, are property of Baylor College of Medicine and may not be shared, distributed, or published outside the College. Students are authorized to view, copy, and print documents as needed for successful completion of coursework. Contents may not be copied for personal, commercial, or non-commercial use.

Course participants retain copyright of all course assignments and posts; however, these materials may be used for educational purposes within the given course, or future courses. In group projects, only the portion of the work completed by that individual is copyrighted by that individual.

Students must observe all applicable restrictions when obtaining copyrighted material from libraries and other sources. Title 17, United States Code, governs the making of photocopies or other reproductions of copyrighted material. Under certain Fair Use circumstances specified in the law, libraries and educational institutions are allowed to furnish copies to students. The copies may not be used for any purpose other than private study, scholarship, or research.

Electronic copies should not be shared with unauthorized users. If a user fails to comply with Fair Use restrictions, he/she may be liable for copyright infringement.

STUDENT RECORD KEEPING

It is imperative that students maintain complete and accurate records of not only their clinical learning experiences, but also their time commitment for other learning activities. Students in the clinical phase of the Program may be asked to enter both case logs and time logs in Typhon Group's AHST Student Tracking System daily. Maintaining case and time logs is a professional responsibility of each individual student.

ADVISING

The student's major advisor for the Program will be the PD. The PD and APD are available to assist students with all aspects of the Program as well as personal issues if the student so

desires. Additionally, each student will be assigned a GC faculty mentor at the start of the Program.

During clinical rotations, the supervising genetic counselor of that rotation should be the student's first choice for a resource person. However, a student may also wish to discuss counseling styles, strategies, etc., with other counselors to get a broader perspective. If a counselor feels that information brought to their attention by the student should be shared with the PD, the counselor is expected to inform the student of such.

REMEDICATION & ACADEMIC INTERVENTIONS

Ideally, students who are struggling will be identified as early as possible in didactic and clinical coursework. This will be achieved through frequent assessment and monitoring of the student's attainment of the practice-based competencies.

1. Students must achieve a final passing grade of B or better in all courses that require grades or must pass any courses that are pass/fail.
2. Course directors may require an academic intervention designed to address less-than-satisfactory performance on a learning or assessment activity within a given course, regardless of whether that learning or assessment activity results in a passing or failing final course grade. When an academic intervention for a learning or assessment activity is required, the highest score possible is the minimum passing score for the learning or assessment activity.
3. Only final course grades can result in formal academic action by the PD or Health Professions Student Promotions Committee (HPSPC, e.g., academic probation, dismissal).
4. When a student achieves a final grade of C, D, or F, the Course Director will evaluate for areas of focused knowledge deficits.
 - a. If a single area of focused knowledge deficit is identified, the Course Director may direct a targeted remediation in the area of weakness.
 - i. Targeted remediation should occur prior to the HPSPC meeting; if this is not possible, the Course Director reports a grade of incomplete (I) to the PD and confers with the Program on a date the remediation will be completed.
 - ii. Successful targeted remediation results in the lowest passing grade in that course (B) being reported as a final grade to the PD.
 - iii. Unsuccessful targeted remediation results in the original failing grade (C, D, or F) being reported as a final grade to the PD.

- b. If more than one area of knowledge deficit is identified, the student is not eligible for targeted remediation and the original failing grade (C, D, or F) is reported as a final grade to the PD.
5. If a student has a single failing final course grade, the PD places the student on academic probation, and arranges comprehensive remediation of the course. The PD can authorize comprehensive remediation for up to two failing final course grades, provided they do not occur concurrently.
 - a. Comprehensive remediation includes a course examination and/or clinical remediation activities representing all course content areas.
 - i. Successful comprehensive remediation will result in the lowest passing grade (B) in the course being reported as a final grade to the PD. The PD will report this grade to the Office of the Registrar.
 - ii. Failure of comprehensive remediation results in the original failing grade (C, D, or F) being reported as a final grade to the PD. The PD will report this grade to the Office of the Registrar and refer the matter to the HPSPC. The HPSPC may require the student to repeat the course in its entirety, or other actions deemed appropriate.
 6. If a student has two or more concurrent failing final course grades (C, D, or F), the PD places the student on academic probation, does not authorize remediation, and refers the matter to the HPSPC. The HPSPC will consider options deemed appropriate, including dismissal.
 7. If, after successfully remediating two failing final course grades, a student has a third failing final course grade, the PD places the student on academic probation, does not authorize remediation, and refers the matter to the HPSPC. The HPSPC will consider options deemed appropriate, including dismissal.

Article 9.7 Academic Performance – Periodic promotion and ultimately recommendation to the President of the College to grant the Master of Science degree require the satisfactory completion of all required courses, examinations, and credits as well as demonstration by the student that he or she is capable of conduct appropriate within the discipline for which he or she is receiving education and training.

In the case of a student whose academic performance has been unsatisfactory in one or more courses or clinical rotations, the Health Professions Student Promotions Committee may require the student to:

1. take a special make-up examination.
2. be placed on Academic Probation.
3. enroll in a remedial course of study.
4. repeat specific courses or rotations even if previously passed.
5. repeat an academic year of study.
6. withdraw from the College.
7. be dismissed from the College and not be allowed to pursue further studies at the institution; and/or
8. comply with other actions as appropriate.

Reference Article 5.13.5 Final Grades of the SHP Student Handbook for additional information can be found in the [Handbook](#) and the adverse actions policy statement:

(https://intranet.bcm.edu/policies/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=28.1.05). Students who are required to repeat a didactic or clinical course are responsible for the same academic work and examinations as required of other students taking the course. It is contrary to policy to offer an examination or re-examination to a student who has been

suspended, withdrawn, dismissed, or is on a leave of absence.

(https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=23.1.12).

BCM publishes a course repeat policy to explicate the Baylor College of Medicine (BCM) criteria for calculating repeats in coursework. The full policy is available in the BCM Policy and Procedure Manual.

http://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=23.1.09

LEARNING ENVIRONMENT

When situations arise that could impede success in learning, students should access support and report concerns. Students may address concerns directly with faculty, staff, Program Directors, and deans, and should review the following policies regarding grievances, mistreatment, and qualifying disabilities.

Reports through avenues described below are addressed confidentially to the extent possible to resolve the issue. BCM enforces an anti-retaliation policy to encourage everyone at BCM to take proper steps to point out problems and to recommend solutions.

THE OMBUDSMAN

The Ombudsman's office provides confidential guidance to any member of the BCM community for handling problems, conflicts, and concerns.

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=32.1.01

STUDENT GREVANCES

BCM is committed to treating all students respectfully and fairly and providing a quality educational environment and experience. Student Services Policy 23.8.01 describes how to appeal a grade, adverse academic action, other academic issue, or conduct, and to report nonacademic, professionalism, and mistreatment issues

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=23.1.08

Report grievances using the **Integrity Hotline** ([https://secure.ethicspoint.com, 855-764-7292](https://secure.ethicspoint.com,855-764-7292)) or via the Intranet www.bcm.ethicspoint.com. Appeals of grades and adverse academic actions must occur within 10 days of the grade being posted to the Student Portal or within 10 business days following personal notice of an adverse action.

MISTREATMENT REPORTS

BCM is committed to providing a safe and supportive environment for all members of the BCM community. All individuals have the right to be free from all forms of sex and gender-based discrimination, which includes sexual harassment, acts of sexual violence, domestic violence, dating violence and stalking. BCM enforces policies related to Harassment, Discrimination, and Retaliation

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&policy_number=02.2.25 and sexual misconduct and other prohibited conduct

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=02.2.26

These policies define prohibited conduct, describe mechanisms for reporting alleged violations,

explain BCM's centralized investigation and adjudication procedures, and identify potential disciplinary actions and remedies. Report prohibited conduct you experience or witness via the **Integrity Hotline** <https://secure.ethicspoint.com> or the Intranet www.bcm.ethicspoint.com. Anonymous reports are investigated to the extent allowed by the information provided, and a system exists to provide confidential follow-up about steps taken.

DISABILITY SERVICES

BCM is committed to providing equal educational access for qualified students with disabilities in accordance with state and federal laws including the Americans with Disabilities Act of 1990, as amended in 2008, and Section 504 of the Rehabilitation Act of 1973. The goal is to provide students with disabilities access to needed resources so that they are afforded every opportunity to do their best work. Further information about these services is available at:

https://intranet.bcm.edu/index.cfm?fuseaction=Policies.Display_Policy&Policy_Number=23.1.07

Students with documented disabilities can seek accommodations by contacting Student Disability Services (713-798-8137) or by the Title IX Coordinator, Ms. Toni Gray (toni.gray@bcm.edu). If an accommodation is granted, the student is responsible for informing the course director of the approved accommodation prior to the first examination.

OTHER

Background Check/TB Testing/Immunizations

Students are required to have criminal background check as they enter the Program. Results are sent directly to the student as well as to the PD. A positive response on the background check will not automatically preclude admission, however, such findings will be reviewed by the Program Admissions committee who will make a recommendation regarding acceptance into the GCP.

Please note that results of any of the criminal background checks may be shared with any of the affiliated hospitals at their request. Students may undergo additional background checks according to policies of affiliated hospitals as well.

TB testing/Immunization Records: Students are required to have an annual TB (Tuberculin) test as well as to submit documentation of current immunization records.

STUDENT ID'S

Students will be issued IDs at the start of orientation. These student ID badges will be used throughout the Program. Replacement of lost or damaged badges will incur an additional cost to the student. All ID badges must be returned to the Program administrative assistant at the time of graduation. Due to COVID-19 additional badges and/or credentials may be required to access BCM campus and affiliates.

CAMPUS RESOURCES

The BCM campus has several resources available to graduate students. Student wellness is a priority and links to relevant resources are found here:

<https://www.bcm.edu/education/academic-faculty-affairs/student-services/student-wellness>.

Graduate students have access to these resources:

- Student wellness is essential to academic progress at Baylor College of Medicine. To support this philosophy, Baylor maintains the BCM Health Care Program for Students (the Program). Baylor requires that all individuals enrolled in any Baylor academic program elect coverage through the Program or are enrolled in alternative coverage that meets all the waiver requirements established by the College. For the 20/21 academic year coverage for the BCM Health Care Program is provided by Blue Cross and Blue Shield of Texas (BCBSTX). Additionally, Academic Health Plans (AHP) is a student health insurance administrator that will assist with enrolling or waiving coverage. Benefit coverage and cost information along with waive requirements can be [found here](#). Students will be provided information during orientation on how to enroll or waive coverage.
- Counseling services are available to students who experience a variety of difficult personal and interpersonal challenges. Graduate school can be very demanding and adjusting to these challenges is not always easy. There are two options available to students. The Student and House Staff Mental Health Services (Phone: (713) 798-4881) and counseling services provided by an independent third party called Well Connect (Phone: (866) 640-4777). We recommend that students feel free to utilize these services at any time. Please refer to the Student Wellness Mental Health website for additional information: <https://www.bcm.edu/education/academic-faculty-affairs/student-services/student-wellness/emotional-mental-health-wellness>

HOUSING

Even though Houston is a big city with a thriving economy, the cost-of-living is low and housing options are relatively inexpensive, especially compared to other big cities and other parts of the country. Most graduate students live off campus in one of the pleasant residential neighborhoods within walking or biking distance of the College. There is a variety of very reasonably priced housing available in the Houston area. Information about housing can be obtained from <https://www.bcm.edu/about-us/life-in-houston/living-in-houston/housing>.

DIVERSITY, EQUITY, AND INCLUSION (DEI) SUPERVISION GUIDE

Pre-Rotation DEI training resources: Prior to supervising students, please consider reviewing the following resources.

- [Race and Genetics: Perspectives of Precision Medicine](#) - This BCM Evenings with Genetics webinar discusses the complexity of identity and its importance to health and disease. Specific examples of factors affecting diseases in genetically and culturally diverse populations will be discussed, and the foundations needed to deliver equitable precision medicine to communities of color. Speakers were Vence L. Bonham Jr. J.D., Fatimah Jackson, Ph.D., and Cherilynn R. Shadding, Ph.D.
- Read through the glossary of DEI related terminology found towards the end of this guide and familiarize yourself with the contents.
- Review the DEI checklist for beginning of rotation prior to your first meeting with a trainee.

Main Rotation Supervisor Checklist: Please use the following checklist during your first encounter with a student and update as needed. We recommend reviewing this checklist with each student individually via email or meeting prior to the start of their rotation.

- Confirm pronouns
- Review accommodations for disabilities
- Ask about specific needs for rotation and how to support
- Review if there are any holidays or observances that the student has previously disclosed via orientation survey
- Offer other people the student can talk to if they feel uncomfortable discussing concerns about the main or individual supervisors.
- Students are always able to anonymously contact the Integrity Hotline at 855-764-7292 with any concerns.
- Ask about topics outside of the rotation itself that the student would like to receive mentoring on
- Address how they would like DEI issues and microaggressions addressed in clinical setting and be prepared to discuss with supervisors

Individual Supervisor Checklist: Please use the following checklist during your first encounter with a student and update as needed.

- Confirm pronouns with student.
- Review if there are any holidays or observances the student has previous disclosed to the program via orientation survey.
- Discuss patient populations seen in this rotation (clinical) or discuss patient population in the context of this rotation (non-clinical). How can we approach cultural differences and develop our cultural humility?
- Incorporate DEI topics into cases prep and case debriefing.

If time permits, consider engaging in ongoing discussion on DEI-related topics using the prompts below.

- What perception gaps (perspectives you don't need to consider) are you working on?
- How might those gaps impact interactions with the patient populations just discussed?
- How can we employ techniques for working with cultures different than our own without relying on stereotypes and while acknowledging diversity within cultural groups?

End of Rotation Considerations

For main rotation supervisors, trainee should complete the post-rotation self-assessment prior to post-rotation meeting. If the trainee indicated that they were *not* respected or supported during their rotation, follow up with trainee to debrief and assess if further action is needed. Please contact GCP Directors if additional action is needed.

Consider facilitating conversations with trainee regarding diversity, health equity, and inclusion during the post-rotation meeting.

- Example prompts:
 - Have any of your perceptions been challenged during this rotation? How can you integrate these reflections into your future rotations?
 - Did you encounter any “cultural bumps” during this rotation? How did you handle it? What did you learn?

DEI GLOSSARY:

Ableism: The discrimination of and social prejudice against people with disabilities based on the belief that typical abilities are superior

Agender: Described a person who identifies as having no gender

Ally/Upstander: A person who stands up, speaks out and or/takes action in defense of those who are targeted for harm or injustice

Assigned Male/Female at Birth: This phrase refers to the sex that is assigned to a child at birth, most often based on the child's external anatomy

Bigender: Describes a person whose gender identity is a combination of two genders

BIPOC: Black and/or Indigenous People of Color

Blind Spot: Unconscious minds (automatic) influence behaviors and beliefs

Bystander Intervention: Recognizing a potentially harmful situation or interaction and choosing to respond in a way that could positively influence the outcome.

Cisgender: A person whose gender identity and assigned sex at birth correspond (i.e., a person who is not transgender)

Cultural Competency: An ability to interact effectively with people across different cultures

Cultural Humility: A lifelong process of self-reflection and self-critique whereby the individual not only learns about another's culture, but one starts with an examination of their own beliefs and cultural identities

Cultural Identity: The definition of groups or individuals (by themselves or others) in terms of cultural or subcultural categories (including ethnicity, nationality, language, religion, and gender)

Disability: A physical, mental, cognitive, or developmental condition that impairs, interferes with, or limits a person's ability to engage in certain tasks or actions or participate in typical daily activities and interactions

Discrimination: The unfair treatment of an individual(s) based on gender, race color, ethnic/national origin, religion, disability, sexual orientation, social class, age, marital status, etc.

Disorders of Sexual Differentiation: Group of rare conditions where the reproductive organs and genitals do not develop as expected; some people prefer the term intersex

Disparity: Lack of similarity or equality; inequality; difference

Equality: The state or quality of being equal; correspondence in quantity, degree, value, rank, or ability

Equity: The quality of being fair or impartial; fairness; impartiality

Explicit Bias: Refers to the attitudes and beliefs we have about a person or group on a conscious level

Gay: A sexual orientation that describes a person who is emotionally and sexually attracted to people of their own gender. It can be used regardless of gender identity but is more commonly used to describe men.

Gender Affirming Hormone Therapy: Medicine prescribed to help a person gain the outward characteristics that match their gender identity

Gender Affirming Surgery: Surgeries used to modify one's body to be more congruent with one's gender identity; also referred to as sex reassignment surgery or gender confirming surgery

Gender Fluid: Describes a person whose gender identity is not fixed; a person who is gender fluid may always feel like a mix of the two traditional genders, but may feel more one gender some of the time, and another gender at other times

Gender Non-conforming: Described a gender expression that differs from a given society's norms for males and females

Genderqueer: Describes a person whose gender identity falls outside of the traditional gender binary structure

Implicit Bias: Bias that results from the tendency to process information based on unconscious associations and feelings, even when these are contrary to one's conscious or declared beliefs

Inclusion: Authentically bringing traditionally excluded individuals and/or groups into processes, activities, and decision/policy making in a way that shares power

Intersectionality: The theory that the overlap of various social identities, as race, gender, sexuality, and class, contributes to the specific type of systemic oppression and discrimination experienced by an individual

Justice: The right to be treated fairly and the responsibility to treat others with fairness

Lesbian: A sexual orientation that describes a woman who is emotionally and sexually attracted to other women

Macroaggression: Large-scale or overt aggression toward those of a different race, culture, gender, etc.

Microaggression: A subtle but offensive comment or action directed at a member of a marginalized group, especially a racial minority that is often unintentionally offensive or unconsciously reinforces a stereotype

Micro assaults: Conscious and intentional actions or slurs, such as using racial epithets, displaying swastikas, or deliberately serving a white person before a person of color in a restaurant. (e.g., macroaggression)

Microinsults: Verbal and nonverbal communications that subtly convey rudeness and insensitivity and demean a person's racial heritage or identity. An example is an employee who asks a colleague of color how she got her job, implying she may have landed it through an affirmative action or quota system.

Microinvalidations: Communications that subtly exclude, negate, or nullify the thoughts, feelings, or experiential reality of a person of color. For instance, white people often ask Asian-Americans where they were born, conveying the message that they are perpetual foreigners in their own land.

Minority Stress: Chronic stress faced by members of stigmatized minority groups. Minority stress is caused by external, objective events and conditions, expectations of such events, the internalization of societal attitudes, and/or concealment of one's sexual orientation.

People of Color: Often the preferred collective term for referring to non-White racial groups. While "people of color" can be a politically useful term and describes people with their own attributes (as opposed to what they are not, e.g., "non-White"), it is also important whenever possible to identify people through their own racial/ethnic group, as each has its own distinct experience and meaning and may be more appropriate.

Prejudice: Preconceived opinion that is not based on reason or actual experience

Race: A social/cultural construct; the idea that the human species is divided into distinct groups based on inherited physical and behavioral differences

Racism: The belief that there is a causal link between inherited physical traits and traits of personality, intellect, morality, and other cultural and behavioral features; and that some races are innately superior to others. The term is also applied to political, economic, or legal institutions and systems that engage in or perpetuate discrimination based on race or otherwise reinforce racial inequalities in wealth and income, education, health care, civil rights, and other areas.

Sexual Orientation: How a person characterizes their emotional and sexual attraction to others

Social Determinants of Health: Conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks

Social Stigma: Negative stereotypes and social status of a person or group based on perceived characteristics that separate that person or group from other members of a society

Structural Stigma: Societal conditions, policies, and institutional practices that restrict the opportunities, resources, and well-being of certain groups of people

Stereotype: A simplified, and standardized conception or image invested with special meaning and held in common by members of a group

Stereotype Threat: Refers to the risk of confirming negative stereotypes about an individual’s racial, ethnic, gender, or cultural group.

Tokenism: The policy or practice of making only a symbolic effort to desegregate power

Two-spirit: Describes a person who embodies both a masculine and a feminine spirit; this is a culture-specific term used among some Native American, American Indian, and First Nations people

White Privilege: Refers to the unquestioned and unearned set of advantages, entitlements, benefits, and choices bestowed on people solely because they are White

Online Glossary: <https://www.racialequitytools.org/glossary>.

Outdated Terms to Avoid:

The following terms may have been used in the past but are now considered outdated and sometimes offensive. We recommend replacing these words with the suggested terms provided.

Should Not Be Used	Should Be Used
Berdache	Two-spirit
Hermaphrodite	Intersex/disorders of sex development
Homosexual	Gay or Lesbian
Sexual preference	Sexual Orientation
Transgendered/A Trans gender/Tranny	Transgender
Sex Change	Gender affirmation surgery
Colored	Person of Color
Caucasian	White
Mental retardation	Intellectual disability

Additional Resources: Please check out the resources below for additional resources and education on DEI and supervision related topics.

- Read the following article addressing how to support a trainee if they experience patient bias in clinic.
 - [How Should Organizations Support Trainees in the Face of Patient Bias?](#)
- Learn more about the 5D method of addressing microaggressions as outlined by Dr. Kimberly Manning in her talk, [From Bystander to Upstander: Advocacy through Action](#).
 - Display discomfort - facial expressions or body language that show disapproval
 - Direct - addressing the microaggression while it’s occurring-Example: Move into clarify if you perceive those assumptions are being made –ask clarifying question of provider or patient
 - Distract - changing the subject so that the microaggression stops occurring-Example: If there is a need to intervene during the session –consider distraction – “let’s move on to ‘X’”
 - Delegate - asking someone else (i.e., a supervisor/advisor) to handle the situation
 - Delay - speak with the recipient of the microaggression after the interaction has ended

Acknowledgements

We would like to thank the Stanford GC Program for allowing us to utilize their DEI rotation supplement guide as a model for this guide.

SOURCES OF ADDITIONAL INFORMATION

SHP Student Handbook: contains a description of the General Academic Rules and Policies governing SHP Students as set forth by the BCM and the SHP.

<https://www.bcm.edu/education/school-of-health-professions/students-resources/student-handbook>. Click on the [Code of Conduct](#) to read the BCM policy.

In advance of matriculation, all students must complete online training on HIPAA (confidentiality & privacy), Infection control (universal precautions), Blood Borne Pathogens, Sexual Harassment & Sexual Misconduct Reporting Guide, Handwashing Tips, CME – Coronavirus Preparation for Providers and Trainees, Personal Protection Equipment (PPE) Training, Outpatient Telehealth Online Module, & FY20 Annual Compliance Training - Code of Conduct. Student conduct, professionalism, privacy, and IT security will also be covered during your orientation.

Student Services Guide: contains additional information about Student Affairs, Student Activities, Academic Services, Other Campus Services, College Policies and Regulations, and a general guide to Houston Cultural Activities: <https://www.bcm.edu/education/academic-faculty-affairs/student-services>.