Notice

The Resident Handbook is a convenient first reference for residents regarding the College's major policies, procedures, and other important information relating to graduate medical education (GME). However, it is not intended as an exclusive reference manual for all College of Medicine or University policies and procedures. As University employees, residents are responsible for knowing and following all applicable College and University policy.

1) A complete posting of updated College of Medicine policies that are specific to Graduate Medical Education is available at: http://hippocrates.ouhsc.edu/policy (policy# 700-750). A link to the policies is also available by logging into MedHub at https://ouhsc.medhub.com/index.mh.

2) The following policies are no longer in the Resident Handbook but are available by clicking on the policy name below:
   - Policy 711: Resident Eligibility, Selection, and Required Documentation
   - Policy 732: Compensation and Benefits
   - Policy 718: GME Resident Commitment to the Teach Learner Relationship
   - Policy 712: Resident Moonlighting
   - Policy 729: Resident Council
   - Policy 716: GME Resident Commitment to the Teach Learner Relationship
   - Policy 721: Certificate of Training
   - Policy 731: Administrative Academic Action
   - Policy 727: Grievances
   - Policy 735: Well-Being in Graduate Medical Education

3) A complete posting of all updated and relevant general University policies is available at: http://hr.ouhsc.edu/Policies-Handbooks and www.ouhsc.edu/EOAA. Some of the policies included are the following: (1) Prevention of Alcohol Abuse and Drug Use on Campus and in the Workplace, (2) Discrimination, Harassment and Sexual Assault, (3) Consensual Sexual Relationships, and (4) Reasonable Accommodation. Grievance procedures for complaints such as discrimination, sexual harassment, or racial and ethnic harassment are also explained.

The information contained in this Handbook may change from time to time by the actions of the institution. Every effort will be made to ensure that the Resident Handbook is regularly updated. However, it is the responsibility of the user to determine that he or she is relying on the most current version of any particular policy. Questions concerning policies should be directed to the residency Program Director or the Office of Graduate Medical Education.
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Introduction

We welcome you to the University of Oklahoma College of Medicine and the University of Oklahoma Health Sciences Center (OUHSC). The College of Medicine, our residency programs, and our affiliated teaching hospitals have a long, respected tradition of excellence in clinical training. We believe you will find your educational experience and training at this medical center stimulating and rewarding. Our goal is to provide excellent preparation for your ultimate career in medicine.

Graduate medical education (GME) includes all of the medical, surgical and other specialty and subspecialty residency programs and fellowships offered by the University of Oklahoma College of Medicine and its affiliated teaching hospitals. Hereafter, all clinical training programs are referred to in this Handbook as residency programs. All clinical trainees, whether residents or fellows, are referred to in this Handbook as residents.

The College of Medicine and its affiliated institutions provide graduate medical education programs that meet the standards established by the Accreditation Council for Graduate Medical Education (ACGME) and other formal GME accrediting bodies. The College's institutional oversight of residency programs and residency affairs is conducted through the Graduate Medical Education Committee (GMEC) and the Associate Dean for Graduate Medical Education, also known as the Designated Institutional Official (DIO) for purposes of accreditation related policy matters.

As a physician in residency training, your primary responsibilities are participating in the educational aspects of your program and in the direct care of patients under the supervision of your Program Director and his/her faculty associates. The College provides a general orientation for new residents in late June. Your Program Director will also provide an orientation for you to the following: the organization and structure of your residency program including educational goals and objectives; duties and responsibilities; rotation, call, and vacation schedules; issuing of equipment (pagers, etc.); and a variety of other matters that are important to you during your time here.

Because of the complexity of graduate medical education and academic medical centers in general, administrative policies and procedures are necessary. The Resident Handbook has been compiled for your benefit and contains the most frequently referenced policies and guidelines that govern our residency training programs as well as certain regulations, benefits, and pertinent resources. The Graduate Medical Education Committee and Program Directors, the affiliated teaching hospitals, the College of Medicine administration, and the Board of Regents of the University of Oklahoma are among those responsible for developing policies and procedures for GME. It is your responsibility to become thoroughly familiar with the material contained in this Handbook and other College/University policies.

As stipulated in your residency agreement, you are obligated to abide by the policies, procedures and regulations in the Resident Handbook and all pertinent College and University policies. If you have questions concerning the information contained herein, please contact your Program Director or the Office of Graduate Medical Education (GME Office).
Residency Agreement

Each individual offered a residency appointment will be provided with a contract known as the Residency Agreement. Each resident is expected to read, sign, and abide by the Residency Agreement which is based upon information located in the Resident Handbook and in official GME policies.

Residents are appointed for a period of one year or as specified in the individual Residency Agreement. Renewal of any residency appointment is contingent upon the resident meeting the performance and attendance standards of the program and University, and is not automatic. Intention by either party not to renew the appointment should be accompanied by appropriate notification as stipulated in the Residency Agreement. Under ordinary circumstances, four (4) months written notice of intent not to renew the agreement will be given. Notwithstanding the notice provision, the University may terminate the appointment of a resident or give notice of intent not to renew the appointment for academic or disciplinary reasons, or failure to appropriately progress within the four months prior to the end of the contract period, with as much written notice as circumstances will reasonably allow. See Administrative Academic Actions policy.

Please note: Residents are not allowed to begin work if they have not completed the Employment Eligibility Verification Form (1-9) within three (3) days of employment. Federal law requires this form, and failure to complete it may result in invalidation of a signed residency agreement and termination. Failure to complete any other documents required by Federal or State law to confirm lawful presence in the United States may also result in such invalidation of the residency agreement and termination.
Campus Resources

Parking
Parking is provided at no cost to the residents through the affiliated institutions. Residents are expected to abide by all rules regarding parking registration, hang tags, etc. Failure to do so can result in a citation with a fine or towing of your vehicle which is the responsibility of the resident.

Medical Library Privileges
Each resident is entitled to use the Robert M. Bird Health Sciences Library, located at 1105 N. Stonewall Avenue on the campus. The library has an extensive periodical subscription and complete information retrieval and audiovisual services in addition to its large book collection. In order to use the library, one must have a "University ID" card which bears a photograph of the individual.

Library Hours
Monday-Thursday: 7:00 a.m. to Midnight
Friday: 7:00 a.m. to 10:00 p.m.
Saturday: 8:00 a.m. to 10:00 p.m.
Sunday: 10:00 a.m. to Midnight
Holidays & Finals: Closed on major holidays and has extended hours for Finals.

Mail
Residents are requested to direct their mail (excluding email), as much as possible, to their home addresses. This serves to expedite and insure efficient handling of personal mail. Residents should promptly make any home address changes through the OUHSC Employee Self-Service link: http://hr.ou.edu/Self-Service and provide the information to their Program Director's office. Departments will make available a distribution system for mail received at the Health Sciences Center. Check with the Program Director's office for specific details.
Personal Health Requirements

Evidence of adequate immunization as required by the College of Medicine and its affiliated clinical institutions is required on initial entry into a residency training program or must be promptly obtained. Influenza immunization is required annually. Participating institutions may have special requirements for individuals who cannot be or elect not to be immunized. TB skin tests are required upon entry into a program and annual screening thereafter. The University's tuberculosis policy was adopted pursuant to federal and state guidelines. Copies of the policy are available from the Office of Environmental Health and Safety.

All residents must participate in required annual health screening as determined by University and hospital(s) administration and the Graduate Medical Education Committee. Information will be provided to you through your Program Director's office.

Residents must also comply with all infection control and infectious disease exposure policies and procedures applicable to the medical staff in the affiliated hospitals and facilities to which they are assigned for rotations.

Familiarity with Occupational Safety and Health Administration (OSHA) requirements is essential and completion and documentation of periodic instruction is mandatory. Full compliance with "universal precautions" as defined by the Centers for Disease Control and institutional infection control practices is expected.

**Failure to comply with the above noted requirements may result in suspension or termination from the residency program.**
Resident Physician Responsibilities

Specific duties and responsibilities are assigned by individual Program Directors. Physicians engaged in the residency training programs of the College of Medicine are, however, generally expected to:

1. Develop a personal program of self-study and professional growth with guidance from the Program Director and facility.

2. Participate in safe, effective and compassionate patient care under appropriate supervision that is commensurate with their level of advancement, skill, and responsibility.

3. Participate fully in the educational activities of their program and, as required, assume responsibility for teaching and supervising other residents and students as is appropriate.

4. Fully meet the performance requirements of the residency program.

5. Participate in institutional programs and activities involving the medical staff and adhere to established practices, procedures, and policies of the affiliated institutions and hospitals.

6. Act by accepted principles of medical ethics and the ethical obligations of employees of a state agency and follow College policy 719 Relationships with Medical Vendors. (See GME website.)

7. Participate in institutional committees and councils, especially those that relate to patient care review and quality improvement activities.

8. Participate in faculty and program evaluation, as well as department and institutional safety and quality improvement activities.

9. Refrain from engaging in any outside employment or professional activities without written approval from the Program Director and provide an accurate accounting of all such activities.
Work Related Exposure or Injury

During the hours of 8:00 a.m. to 4:30 p.m., Monday-Friday, residents exposed to potentially infectious and/or hazardous materials including needle sticks, blood, or bloody body fluids must immediately call (405) 271-9675 to report the incident to the OU Physician’s Occupational Medicine Clinic. Per OSHA and the Oklahoma Occupational Health & Safety Standards Act, all needle sticks must be reported even if no medical treatment is provided. The Occupational Medicine Nurse will provide further instructions to facilitate source patient testing dependent upon the facility where the incident occurred. For exposures occurring at times other than those stated above, residents must report for treatment to the emergency room of the facility in which they are working within two (2) hours of the exposure (Please make sure to let the ER know you are an OUHSC employee and your exposure is work related and must be filed with CCMSI and not your personal health insurance). Residents requiring post-exposure treatment protocols for HIV, HBV and other infectious diseases must report to OU Physician’s Occupational Medicine Clinic located in the OU Physician’s Building, Suite 4A.

All work-related illness or injuries must be also reported as soon as possible directly to the Program Director or his/her office for verification. Failure to document a work-related injury/illness could result in the denial of the claim and/or delay of payment for medical services.

Residents must also contact the following office to obtain the necessary reporting forms to document a work-related illness or injury: Human Resources Workers' Compensation Section, Research Parkway, Bldg 865, Room 270, telephone 271-2190, ext 44710. The reporting forms are also available at [http://hr.ouhsc.edu/Employees/Workers-Compensation](http://hr.ouhsc.edu/Employees/Workers-Compensation) Residents must complete the “Employee’s Report of Injury.” The resident’s program department is responsible for completing the additional required forms and submitting all paperwork to Human Resources.
Professional Liability Insurance

Any practicing physician may be held liable by the law for accidents, errors, or omissions in professional judgment or professional acts uncommon to the practice of medicine in the community. Therefore, all residents must make application for, obtain, and maintain professional liability coverage through the carrier designated by the University of Oklahoma College of Medicine. The College will provide an occurrence policy for supervised medical practice within the scope of the training program. Residents will receive necessary instructions from their Program Director regarding their professional liability insurance. Terms of the professional liability insurance policy provided are available for review on the College website.

Unsupervised Moonlighting: Unsupervised professional activities outside the scope of the residency training program are not covered by the College of Medicine policy provided for residency practice. Residents engaging in any unsupervised professional activities must be appropriately credentialed for practice and apply for and purchase, at their own expense, additional professional liability insurance covering these activities.

Adverse Events and Potential Litigation: Residents that: 1) are a part of any medical activity that results in an adverse event, 2) suspect that they might be named in any legal actions involving a patient, or 3) have been notified of legal action, must immediately notify OUP-OUM Risk Management Services at 271-1800. Subsequent to this reporting, they must also notify their Program Director.
Prescribing and handling of controlled substances in Oklahoma without possessing an active controlled substance registration from the Oklahoma Bureau of Narcotics and Dangerous Drugs (OBNDD) and the United States Drug Enforcement Administration (DEA) is illegal. State and federal registrations are required for both allopathic (MD) and osteopathic (DO) physicians. Until residents obtain their own unique registration numbers, they may use an institutional DEA number to prescribe controlled substances within the confines of the inpatient facility in which they are appointed as a trainee in a College of Medicine residency program. Please note that this use of the "institutional DEA number" applies only within the hospital and is not for any medical practice or prescriptions requiring filling outside the institution.

It is the responsibility of the resident to obtain the necessary information and application forms for these registrations and to keep his/her registrations current. The OBNDD will provide an application only to those who can provide an Oklahoma medical license number (special or full). New residents can obtain an application by calling the OBNDD's toll free number: (800) 522-8031. The registration number is usually issued promptly.

Upon receiving a full and unrestricted license to practice medicine, residents become eligible to apply for a personal DEA number. Residents should contact the DEA directly regarding an application form and the procedures to follow. The DEA usually takes 6 to 8 weeks from the date of receipt of application to process the resident's application. Please Note: DEA authorities will contact the OBNDD to verify that an OBNDD number has been issued to the resident before completing the process and issuing the resident a federal narcotics prescribing certificate.

Oklahoma State Law requires that prescribers of controlled substances review patient prescription utilization through the Oklahoma Prescription Monitoring Program (PMP) database and document that review in the medical record. In some instances prescribers are required to have a patient-provider agreement in place for chronic pain treatment. The Opioid Law also requires that all licensees receive at least one hour of education in pain management OR one hour of education on use of opioids or addiction annually to renew medical license.

Oklahoma State Law requires that prescriptions for controlled substances (not just opioids) must be electronically prescribed. Paper prescriptions can only be used in certain circumstances, i.e. temporary technological, electrical failure, or other extenuating circumstance that prevents prescription from being transmitted electronically. The reason for the exception must be documented in the patient’s medical record.

Residents who move to Oklahoma from another state and hold an existing DEA registration must modify their DEA registration to show an Oklahoma practice address. Residents intending to practice in more than one state must have a DEA registration for each state in which they practice.
Please Note: Residents whose practice is restricted to the care of patients within their residency program are eligible for a waiver of fees associated with both OBNDD and DEA registration. You may contact your program director for details. However, any resident practicing medicine outside of the context of the residency program is not eligible for this waiver. Those doing so may be subject to both state and federal penalties.

Please refer to OU College of Medicine GME Policy 703 for additional information.
Medical Records and Protected Health Information

Medical records that are accurate and completed in a timely fashion are of the utmost importance in caring for patients and also serve as a basis for later clinical investigative work. Therefore, great emphasis is placed on the preparation and maintenance of accurate medical records in the hospitals and clinics. Residents should be aware of the rules and regulations regarding medical records at each institution, including those at OUHSC’s hospital affiliate OU Medicine. Specific rules concerning medical records vary with the different services and hospitals, and each resident is responsible to be aware of these rules. General rules apply to all services, and they are:

Preparation and Maintenance of Medical Records

1. A complete history and physical examination must be completed within 24 hours after admission of each patient, or within the standards determined by the hospital's medical staff policy.

2. Complete, legible, and timely progress notes must accurately reflect the patient's hospital course and clearly document the supervision of attending faculty. The timing and number of notes completed on any given day must be commensurate with the care provided and clearly document the critical elements of the medical decision making and care provided.

3. Residents must date and sign each entry made in the clinical record assuring legibility of the resident's name. This is the standard for both written and electronic notes.

4. Abbreviations may not be used unless specifically allowed by hospital or clinic policy.

5. Each patient has a unique medical record number. This identifies him/her for all medical purposes. The medical record number must be placed on every document and on every form requesting ancillary services. Generally, a pre-printed sticker will be available for this purpose if done outside of an electronic record or order entry.

6. When it is known that a patient is to be discharged to another care facility, all residents responsible for the preparation of items in the record must complete those items before the patient leaves the hospital. Otherwise those items should be completed as quickly as possible and in accordance with hospital or clinic policy.

7. The service discharging a patient is responsible for assuring that all required documentation of the patient's hospitalization is present in the record within the required period of time.

8. Residents attending to or consulting on patients in an emergency department must complete the medical record immediately after a patient is seen/treated. Emergency department records are needed by many other services that are treating or assuming care of the patient.
9. At regular intervals, appropriate hospital committees will review medical record
delinquencies and deficiencies, including those of residents. **Serious deficiencies will be reported to the appropriate Program Director for administrative action.**

10. **If deficiencies are not corrected in a timely fashion, the Executive Committee of the Medical Staff may also levy sanctions that restrict a resident's activity in that facility.**

**Confidentiality of Medical Information/HIPAA**

1. Residents are cautioned that all medical records and medical information (Protected Health Information or PHI) in any form are confidential. The use and disclosure of PHI is restricted by federal law, including the Privacy and Security Regulations promulgated pursuant to the Health Insurance Portability and Accountability Act (HIPAA) of 1996, and state laws.

2. Residents must become familiar with and comply with the University's, College’s, and Program’s HIPAA Privacy and Security Policies and Procedures (HIPAA Policies). The failure to comply with HIPAA Policies will result in corrective and/or disciplinary action, up to and including termination from the program.

3. Residents must use reasonable efforts to safeguard all PHI, consistent with HIPAA Policies. For example, residents must not discuss particular patients in public, leave medical information in places where unauthorized persons could access it, or store it on unencrypted devices or servers.

4. Residents must comply with all University policy regarding encrypting Portable Computing Devices (including personally-owned devices) used to conduct University Business, which includes accessing University email accounts on the device.

5. Residents must not take PHI with them in any form or format and must delete it from all personally-owned devices when they leave the University.

6. Residents must not forward, auto-forward, or re-direct their OUHSC email messages to a non-University email account. Residents must not store patient information in clouds or in other off-campus storage that is not specifically approved by IT Security.

7. When a Resident believes it is necessary (versus convenient) to remove PHI from campus or an assigned facility for the performance of assigned duties, the Resident must abide by the procedures of the University or external facility regarding the removal of PHI and must secure PHI during transportation and at the destination, in accordance with such policy. Residents must immediately notify their Program Director, the University Privacy Official, and/or the HIPAA Security Officer if the PHI or device containing PHI is lost or stolen. Residents also must abide by the HIPAA policies of any off-campus facility while rotating at that facility.
8. Residents must use reasonable efforts to safeguard all PHI, consistent with HIPAA regulations and University policy. Carrying patient lists, surgery schedules, or treatment notes in your pocket is NOT a secure method of transporting paper PHI. If Residents must transport PHI, they should use a folder, brief case, purse, wallet, or similar to transport it. Lost PHI can result in a HIPAA violation, so please use caution when transporting PHI.

9. Residents must not access records they are not authorized to access. Access is permissible only for Treatment, Payment, or Operation purposes and only when necessary to do so in accordance with the Minimum Necessary Rule, access beyond that is a violation of federal law and should immediately be reported to your program supervisor and the HIPAA Compliance Team.

The University's HIPAA Privacy and Security policies and procedures are available at http://www.ouhsc.edu/hipaa/ or Office of Compliance at 405-271-2511.
Dress Guidelines

The University of Oklahoma Health Sciences Center and the College of Medicine have no formal dress code for residents. However, given the special nature of dealing with patients and their families, there are certain guidelines that are appropriate.

Professional appearance and demeanor are a demonstration of respect for the patient and the profession. This professional appearance and demeanor should be maintained at all times by faculty, residents, and medical students. Individual programs will inform residents of standards or requirements unique to that department or program. The resident must abide by the prevailing standards of the program and facility in which they are training.

In general, clothing should be clean and in good repair. Blue jeans, shorts, t-shirts, hats, and exercise clothing are not acceptable. Hair should be kept well-groomed and neat. Mustaches and beards should be neatly trimmed. A clean clinical jacket, or other professionally appropriate attire, should be worn at all times while on duty.

Badges and name tags are issued to each resident and must be worn for identification by patients, families, hospital, and clinic personnel.
Equipment

Residents may be assigned pagers, phones, tablets, keys, electronic pass cards, parking cards, and other equipment or items as deemed necessary. Each individual resident is responsible for the equipment originally assigned to them by the program and must not exchange their equipment with other residents unless authorized to do so by the Program Director. If equipment malfunctions, it must be returned to the department for exchange or repair.

Electronic devices will be issued, returned for repairs, exchanged, logged, and checked in, in accordance with the policies of the individual residency programs. In the event of loss or destruction, the resident to whom the equipment was assigned is responsible for the replacement cost of the item or device.

ALL electronic devices, whether University-issued or personally owned, that will be used for University business must be encrypted. You must work with your training program and department IT staff to complete the required encryption process.

Before a resident completes or leaves an OUHSC training program, the equipment, keys, and other items assigned to the resident must be returned in good working order no later than the last working day. Any laptop or mobile device that stores University data of any type must be wiped clean of all University data upon leaving the residency program.
Resident Ombudsman Program

The Resident Council provides all residents with access to an independently operated and fully confidential Ombudsman Program. This program provides an avenue for residents to confidentially raise and discuss concerns related to their education or work environment without fear of intimidation or retaliation. College of Medicine Faculty who act as an ombudsman are peer selected by the Resident Council based on having demonstrated the necessary knowledge, skills, and experience as mentors to and advocates for residents. All Ombudsmen are knowledgeable regarding College of Medicine and University policy and can guide and mentor residents in obtaining and understanding avenues available to them for the purposes of raising and resolving issues. Each academic year, the Resident Council posts an updated listing of available ombudsmen and the means to contact them. Residents desiring to meet with an ombudsman can also contact Resident Council leadership for questions and information on the program and how to make contact.
Physician Recovery Program

The College of Medicine recognizes the importance of providing an avenue for intervention and treatment for physicians in residency that develop or have impairment for any reason including alcohol or chemical dependence, or other behavioral/mental health problems. The College and its training programs want to work with trainees in a strongly supportive manner for rehabilitation of impairment.

The College of Medicine has developed working agreements with the Oklahoma State Medical Association (OSMA) Oklahoma Health Professionals Program, Inc. (OHPP) as a method to deal with these problems and develop workable recovery programs. The Oklahoma Health Professionals Program, Inc. (OHPP) is a special program of the OSMA. The program's purpose is to provide a peer-sponsored program for physicians who have developed such impairment. The program approaches individuals with the following resources: (1) a method for confronting physicians regarding their problems, (2) a mechanism for evaluation of problems, and (3) identification of appropriate treatment programs for these individuals.

The Oklahoma State Board of Medical Licensure and Supervision has recognized the OHPP for its activities, and the Board allows the program to supervise physicians who voluntarily commit to its program and ongoing monitoring activities. The Board respects the confidentiality of the OHPP program except where otherwise required by law.

The following procedures are followed in the case of trainees entering the OHPP. The residency Program Director meets with the trainee and provides them with the contact information for the Director of the OSMA OHPP program or their designated representative. A self-referral can often avoid suspension or disciplinary actions associated with the discovery of impairment. The OHPP meeting is a "pre-evaluation" session that normally leads to a formal multidisciplinary evaluation, but it may lead directly to a treatment program. The residency Program Director will require the trainee to follow the OHPP's recommendations as a condition of continuing in the residency program. The expense of these evaluation and treatment programs is the responsibility of the trainee, but may be covered partially by their health care insurance.

The residency program will require periodic verification from the OHPP that the individual is continuing in the OHPP. Trainees may be asked to sign an agreement which outlines the terms and conditions necessary for their continued participation in the residency program. Failure to continue in the OHPP or to sign an agreement, if asked, will result in termination from residency training. The OHPP includes a monitoring testing schedule and trainees who are participants in the OHPP must submit to the program's testing schedule, rules, and regulations. Testing sites are designated by the OHPP. After participating in the Oklahoma OHPP, an individual moving from Oklahoma can generally transfer to another state's physician recovery program.
The University of Oklahoma, in compliance with all applicable federal and state laws and regulations does not discriminate on the basis of race, color, national origin, sex, sexual orientation, genetic information, gender identity, gender expression, age, religion, disability, political beliefs, or status as a veteran in any of its policies, practices, or procedures. This includes, but is not limited to: admissions, employment, financial aid, housing, services in educational programs or activities, or health care services that the University operates or provides. For questions regarding discrimination, sexual assault, sexual misconduct, or sexual harassment, please contact the Institutional Equity Office as may be applicable: Norman campus at (405) 325-3546, the Health Sciences Center at (405) 271-2110, Title IX/Sexual Misconduct Office Norman at (405) 325-2215, or Health Sciences Center at (405) 271-2110. Please see www.ou.edu/eoo. The University of Oklahoma is an equal opportunity institution.