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Welcome to Michigan State University, College of Osteopathic Medicine (MSUCOM)! We are excited that you’ve decided to visit with us and learn more about the Osteopathic profession. We hope to make your experience a memorable one. Our visit day programs are aimed at: exposing students to the osteopathic medicine profession, strengthening health career interests of participants, discovering numerous medical specialties and participating in active hands-on learning while building friendships with fellow participants.

This opportunity promotes intellectual, personal, and social growth. To make the most of your experience, please review this handbook carefully with your family. Valuable information is provided in this handbook that will help you to prepare for the program. We hope that your visit experience inspires you to consider an academic journey in the health sciences. We look forward to your arrival and anticipate that this experience will be an unforgettable one.

Our Mission

Our mission is to broaden the health care interests of participants who may have an interest in the health sciences. This program allows participants to learn about the Osteopathic profession with fellow high school participants while promoting the following:
- Meeting medical students and faculty members
- Find out what medical school is really like
- Discovering numerous medical specialties
- Participate in active hands on learning

Important Contacts

College of Osteopathic Medicine Program Administrators

Mollie Mfodwo, Manager of Pre-College Programs 517-884-7729, mfodwomo@msu.edu
Anne Snyder, Recruitment Manager 586-263-6753, snyde137@msu.edu
Your Time on Campus

Respecting Diversity
At MSU we take great pride in our diversity. Valuing inclusion means providing all who live, learn, and work at the university the opportunity to actively participate in a vibrant community that offers a broad range of ideas and perspectives. To benefit from our campus’s diversity, we embrace the opportunity to learn from each other. At MSU, we welcome a full spectrum of experiences, viewpoints and intellectual approaches because it enriches conversation and benefits everyone, even as it challenges us to grow and think differently.

Future DOcs expects its participants to treat themselves and each other with respect, in accordance with MSU’s policies. [http://splife.studentlife.msu.edu/regulations/general-student-regulations](http://splife.studentlife.msu.edu/regulations/general-student-regulations)

Participants with Disabilities
Disabilities need not preclude the achievement of goals and dreams. Rather, they mandate a greater level of creativity and commitment, along with a repertoire of compensatory techniques. The team of professionals at the Resource Center for Persons with Disabilities (RCPD) is ready to assist participants, employees and visitors with resources that create an environment of opportunity. We value full integration of persons with disabilities throughout university programs and services. We believe that persons with disabilities at MSU are as much in control of their educational and work experience as able-bodied persons.

For more information on MSU policies regarding disabilities, visit [https://www.rcpd.msu.edu/](https://www.rcpd.msu.edu/)

Please inform the MSUCOM administrators about any disabilities prior to the start of the program, so we may provide accommodations.

Participant Health

Participant health is a significant concern during any program and program administrators, as well as staff, are notified any time there is a concern about a participant’s physical or mental health.

Health Form
All participants must have a current Medical Treatment Authorization for Michigan State University form on file before attending the visit day/program. All accepted participants must bring a copy of their medical insurance in case an emergency occurs.

Illness or Injury While Attending the Program
If a participant becomes ill or is injured while attending the program activities, parent(s)/guardian(s) will be contacted. If the injury or illness hinders student from participating, parents will be asked to pick up the child.

If the participants require immediate medical attention at any time, he/she will be taken to the nearest emergency room. In the event of an emergency medical situation, 911 will be called, and staff members will contact the participants parent(s)/guardian(s), or designated emergency contact as soon as possible. Families are responsible for ambulance transportation bills as well as any other medical treatment bills accrued to treat the participant.

**Emergency contact information will be shared with all program affiliated staff/partners (inclusive of medical facilities offsite)**
General Supervision
Participants in the program will be supervised at all times throughout the program. At minimum there will be at least 5 adults per 25 participants supervising throughout all program activities.

Medical Student Volunteers
Medical mentors will provide guidance and supervision while participants are engaging in their activities throughout the program. Medical student volunteers also assist the instructors by attending hands-on learning sessions. They are available for extra help with class concepts and are current medical students attending MSUCOM.

Program Affiliates
All adults interacting with participants will abide by University policies in refraining from having personal, non-programmatic related electronic communications with participants (email, phone, text, social media, etc.) throughout the duration of the program.

All adults overseeing minors throughout the program are prohibited from the following:

- Meeting participants off-site or off-hours
- Giving personal gifts to participants
- Possess, consume, or be under the influence of alcohol, medical marijuana, or illegal drugs at any time the adult has responsibility for the minor participants
- Possess a firearm or other weapon at any time during the youth program

Emergency Procedures
- The MSU Alert System for emergencies sends out notifications via email, text message, and pre-recorded phone call. If you would like to receive SMS text messages on your cell phone, you can register your phone information by logging in to our system and adding your number, at http://alert.msu.edu/.
- In case of a weather related emergency, (severe thunderstorm warning or tornado warning), everyone should seek shelter in an interior hallway in the basement or ground level of a building, or in the lowest level of a parking ramp away from windows.
- In case of other emergencies on campus (accident, medical emergency, suspicious activity, presence of a firearm), the best course of action is to call 911 immediately.
- If a “Secure in Place” action is advised (for active violence), you should:
  - Lock doors of the room you are in (Main doors of building will also be locked.)
  - Close blinds and turn off lights.
  - Find a well-hidden and protected area to hide using objects in the room to barricade with or hide behind.
  - Wait for the “All Clear” from the MSU Alert System before leaving your secure location.

Campus Facilities

Classroom Buildings
Several buildings, classrooms or labs may be used across campus/site, and as guests on MSU’s campus where learning is taking place, participants are expected to respect all property at the attending site and take extra care in keeping the areas they use clean and intact.
Your Visit Day

Program Schedule
A program agenda will be provided to all participants during the beginning of the program. All materials required for classroom activities will be provided by MSUCOM.

Meals

- Lunch will be provided

Participant Information

Personal Belongings

* MSU College of Osteopathic Medicine and MSU are not responsible for any lost, damaged, or stolen items.

Personal Property
Participants are responsible for any items they bring to campus. Participants should refrain from bringing any items of value.

Cell Phones and Communication
Participants may bring cell phones to campus as a means of communicating with their family. However, participants are NOT allowed to use their cell phones or other communication devices during the program including while walking to and from classes. Cell phones and communication devices must be turned off during the academic day. Cell phones that are used during scheduled program activities may be confiscated and returned at the end of the day. * CELL PHONES ARE NOT PERMITTED IN THE ANATOMY LAB

Dress Code Guidelines
All participants must remember that MSU outreach programs require that students dress appropriately for an academic environment. Please see examples of appropriate attire:

- Shirts and shoes (closed toed) must be worn at all times
- Tops and bottoms must meet – refraining from showing mid-drift
- Underwear must not be visible; shorts or skirts must be an appropriate length (shorts must be no shorter than mid-thigh)
- All shirts must have two straps or sleeves; low-cut/revealing shirts/spaghetti strap/low cut tank tops are not allowed
- Clothing must not display profanity or offensive slogans/symbols
- Shoes must not have wheels
- MSU name tag must be worn at all times
**Bio-Chemistry Lab & Anatomy Lab Safety**

**Coming to Lab**
- **Dress Appropriately**
  - **No open-toed shoes or high heels**
  - Long pants, preferably jeans
  - Tie up long hair
  - Do not wear excessive amounts of perfumes and hairsprays
- Be prepared, read lab manual and procedures ahead of time
- **NO cameras or cell phones**

**In the Lab**
- Put away belongings so that walk paths are clear or in designated areas
- Always wear appropriate protection
- Always leave yourself enough time to clean up
- Keep work area neat and clean
- Do not rush
- Don’t be afraid to ask questions
- Inspect equipment before usage
- Identify Waste bins
  - Biohazards
  - Oxidizers
  - Liquid vs Solids
- Identify Lab Safety Equipment
  - Eyewash stations
  - Fire Extinguisher
  - Fire Blankets
  - Emergency exits
  - Spill Kit
  - First Aid Kit
  - Telephones/Contact information/Alarm system

**DO NOT:**
- Do not smell or taste any chemicals
- Do not bring food/drink into the lab or consume food/drink in lab
- Do not casually throw chemicals down the drain or in a trash bin
- Do not leave the room with gloves or touch common areas
- Do not conduct any unauthorized experiments
- Do not leave experiments unattended while in progress
- Do not attempt to catch a falling object
- Do not sit on lab benches
- Do not clean broken glassware by yourself, call an instructor

**Chemicals**
- Consider all chemicals to be hazardous unless otherwise stated
- Immediately report any spills, accidents, or injuries to an instructor
- Know what you are using, read the labels
- Do not handle chemicals near open flames
- Do not put excess reagents back in stock containers, dispose of them properly
- Always pour acids into water. **If you pour water into acid, the heat of reaction will cause the water to explode into steam, sometimes violently, and the acid will splatter**
➢ If chemicals come into contact with your skin or eyes, **flush immediately** by running area under cold water and get an instructor
➢ Never point a test tube or any vessel that you are heating at yourself or your neighbor—**it may erupt like a geyser**
➢ Dispose of chemicals properly
➢ Never leave burners unattended
➢ Beware of hot glass
➢ Use a hot water bath to heat flammable liquids. Never heat directly with a flame

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**University Resources**

### Policies

Participation in the MSUCOM outreach program is a *privilege*, not a right. The following actions will not be tolerated and may result in the participant’s dismissal from the program:

- Violation of Academic Integrity, such as cheating or plagiarism (See section on Academic Integrity for more details)
- Any inappropriate behavior towards others, such as harassment, abuse, violence, bullying (physical, verbal, or cyber-bullying) or other misconduct will not be tolerated.
- Discriminating against or harassing on the basis of age, color, gender, gender identity, disability status, height, marital status, national origin, political persuasion, race, religion, sexual orientation, veteran status, or weight will not be tolerated. The full University Anti-Discrimination Policy is available here: [https://www.hr.msu.edu/policies-procedures/university-wide/ADP_policy.html](https://www.hr.msu.edu/policies-procedures/university-wide/ADP_policy.html)
- Sexual harassment, sexual abuse, and other sexually inappropriate conduct will not be tolerated. See next section for Reporting Protocols. The full MSU policy on Sexual Harassment is available here: [http://inclusion.msu.edu/Equity/Sexual%20Harassment%20Policy.pdf](http://inclusion.msu.edu/Equity/Sexual%20Harassment%20Policy.pdf)
- Inappropriate use of cameras or other digital recording devices in restrooms, and other areas where privacy is expected by participants.
- Prohibition against possession and/or use of alcohol, illegal drugs, fireworks, or lethal weapons, on and off campus.
- Any misuse or damage of University property is prohibited, and participants may be financially responsible for any damage incurred.
- Use of any materials presenting a fire hazard such as candles or incense. Tampering with fire alarms is prohibited.
- Theft of personal property or university property
- Violations of federal, state and local laws, or program rules

In addition, rules given verbally by the program instructor or supervising adult must be followed.

### University Reporting Protocols

The University strives to offer a safe and supportive learning and working environment for all individuals. In support of that goal, the University has established reporting protocols for its employees and volunteers with respect to child abuse, sexual assault, and child pornography. Procedures for reporting violations may be found at: [http://www.hr.msu.edu/documents/uwidepolproc/ReportingProtocols.htm](http://www.hr.msu.edu/documents/uwidepolproc/ReportingProtocols.htm)
All individuals who have direct contact with participants have been subject to a criminal background check (including sex offender registry check) through the Human Resource Department within the last twelve months. All employees of MSU are mandated reporters.

**Academic Integrity**

OsteoCHAMPS adheres to Michigan State University expectations about academic integrity.

Academic integrity is honest and responsible scholarship. Participants are expected to submit original work and give credit to other peoples’ ideas. Maintaining academic integrity involves:

- Creating and expressing your own ideas in course work
- Acknowledging all sources of information
- Completing assignments independently or acknowledging collaboration
- Accurately reporting results when conducting your own research or with respect to labs
- Honesty during examinations

Academic integrity is the foundation of university success. Learning how to express original ideas, cite sources, work independently, and report results accurately and honestly are skills that carry participants beyond their academic career. Academic dishonesty not only cheats the participant of valuable learning experiences, but may result in a failing grade on assignments, a failing grade in a course, or even expulsion from the university for the participant.

The following are additional MSU resources on plagiarism and academic integrity:

https://www.msu.edu/~ombud/academic-integrity/plagiarism-policy.html
https://www.msu.edu/~ombud/academic-integrity/participant-faq.html

**Discipline Procedures & Dismissal from the Program**

All participants are expected to be on their best behavior and abide by the rules listed in this document. The conduct rules in this document are non-negotiable. Failure to adhere to the rules and regulations impacts other participants and the program as a whole. Therefore, to ensure all participants have a positive experience in the program, the following consequences will be imposed for those participants who choose to disregard any of the rules.

**First offense**

If there is alleged violation of University policies or conduct rules of the program, Program Administrators will further investigate to collect information regarding the matter. Pending the outcome of that investigation a verbal warning may be issued if the alleged violation did not fully violate University policies or conduct rules and or immediate dismissal if there is evidence of violating University policies or conduct rules. A telephone call will be made to parent or legal guardian to pick up their child immediately. Verbal warning by the Program Administrators will be issued and documented in an Incident Report.

**Second offense**

If there is another alleged violation or incident where a participant has violated the University policies or conduct rules of the program, Program Administration will proceed with removal from the program. A telephone call will be made to parent or legal guardian to pick up their child immediately.
Serious misconduct may warrant immediate dismissal release from the program and removal from the Michigan State University campus. Violations of rules implicating the safety of the participant, other participants, or program staff or serious property damage will generally result in immediate dismissal from the program. The parent(s) or legal guardian will be responsible for picking up their child immediately.

Before Your Arrival

**Important Dates**

**The Day of the Program**
Participants will officially be welcomed into MSUCOM outreach program and receive the materials needed for the duration of the program.

**Date, Time & Location**
- **Program Information:** November 15, 2019 from 8:30am-1:00pm
- **Lunch:** 12:35pm-12:55pm

Registration begins at 8am in Conrad Hall – 888 Wilson Rd, East Lansing, MI 48824

**Forms**

**Participant Forms**
To assist the MSUCOM staff in preparing for your participant's arrival, *please complete and return all required forms prior to or on the first day of the visit/program.*

This is inclusive of:
- Anatomy Lab Form
- Osteopathic Manipulative Medicine
- Handbook Acknowledgement Form
- Media Release Form
- Medical Treatment Authorization Form
- Parent/Guardian Consent Form
- Other – Medical facilities/partners may require additional documentations to be completed

**Maps & Parking**

Conrad Hall – 888 Wilson Rd, East Lansing, MI 48824
Parking - Warton Center (Code will be provided prior)
ACKNOWLEDGMENT

We have read and understand this document and agree to follow all University rules, policies, and ordinances during the HOSA program. I understand that if I have questions about any of the rules, policies, or ordinances, it is my obligation to ask the program director or other staff member for clarification. I understand that students who are involved in serious conduct issues may be dismissed from the program early. In such an event, I agree to pick up my child from the program and he/she will not be permitted to return.

Student Name (First, Last):________________________________________________________

Student Signature: ____________________________ Date: ________________

Parent/Legal Guardian Name (First, Last): ____________________________

Parent/Legal Guardian Signature: ____________________________ Date: ________________

*Please sign and return a copy of this document to our office prior to the start of the program.*
MICHIGAN STATE UNIVERSITY
WILLEDBODY PROGRAM

SPECIMEN RESPECT, CARE & LAB USE POLICY

The donors to the Department of Radiology’s Willed Body Program have made a unique and significant gift. The anatomical specimens you will be studying must be treated with respect and dignity at all times. In short, students are expected to display PROFESSIONAL AND ETHICAL BEHAVIOR towards donors. This is expected at all times and includes:

- **NO** recording in the gross anatomy lab is permitted by any means (still photographs, video, etc.)

- Professional conduct must be adhered to at all times.

- Anatomical specimens, tissues, and skeletal material are to be handled carefully and **MUST NOT** be taken from the laboratory.

- The anatomical specimens are identified only by number on an orange plastic wrist band. **THIS BAND MUST NOT BE REMOVED UNDER ANY CIRCUMSTANCES.**

- A blunt probe or a tongue depressor is useful in pointing to or moving anatomical structures. Marking instruments such as pens, pencils and magic markers are not permitted.

- Instruments dropped on the floor must be washed **immediately** with soap and water.

- Paper toweling, used gloves and disposable pointing instruments are to be deposited in the appropriate trash containers, not left in the specimen trays.

The assistance and cooperation of students is a major contribution to our efforts in making the Human Gross Anatomy Laboratory an effective and pleasant learning facility. Please direct any questions or concerns regarding this policy your course instructor.

I have read and understand my responsibilities as a user of the Human Gross Anatomy Laboratory and adjacent rooms. I agree to observe the rules/guidelines as outlined above.

Student Signature (Print Full Name)   Date
Michigan State University College of Osteopathic Medicine
Osteopathic Manipulative Medicine Informed Consent

I understand that this encounter serves only as a health screening and should not be a substitute for my regular healthcare visits and that no diagnosis will be made. The medical staff may recommend follow-up with my healthcare provider(s), but is in no manner responsible for arranging or supervising such care. The staff may consist of medical students and licensed physicians and other individuals associated with MSU College of Osteopathic Medicine (MSUCOM) and its partners.

First and second year MSU College of Osteopathic Medicine students will execute the OMM demonstrations. My participation in this MSUCOM OMM demonstration is voluntary. It is a free service provided by the students of the College of Osteopathic Medicine, and I may discontinue my participation at any time without penalty.

In addition, I hereby grant permission to MSUCOM to photograph/video/record me during this OMM demonstration. I understand and give my permission for MSUCOM to use the image and/or voice of me in publications, videos, mass media, or other venues, for educational, service, research or public relations activities association with this service.

Name: ____________________________________________

Signature: ____________________________________________

Date: __________________
MICHIGAN STATE UNIVERSITY MEDIA RELEASE FORM

Participants in MSU-sponsored programs and activities may be photographed and videotaped for use in MSU promotional and educational materials. The participants are not identified by name in the materials.

I authorize MSU to record the image and voice of the subject named below and I give MSU, and all those acting with MSU’s approval, all rights to use these images and voice recordings. I understand that such images and/or recordings may be used for educational and promotional purposes. This authority extends to all conventional and electronic media, including the Internet and any future media, and to any printed material.

I understand and agree that these images and recordings may be duplicated, distributed with or without charge, and/or altered in any manner without compensation or liability, in perpetuity.

Print subject’s name: ____________________________

Signature of Parent/Guardian of minor participant or of participant aged 18 and up:

__________________________  Date: ____________

__________________________  Date: ____________
MEDICAL TREATMENT AUTHORIZATION FOR MICHIGAN STATE UNIVERSITY

Your child will be involved in a Michigan State University program on the above date(s). This form must be completed and signed by a parent or guardian to give a medical facility permission to treat the participant for minor injuries or medical problems. In the event of serious injury or illness, the parent or person designated will be contacted. Treatment will proceed before contacting the parent or person designated only if the situation is urgent and does not permit delay.

Participant's full legal name:

Last          First          M.I.

Mailing Address:

Parent phone: day ( ) _______ evening: ( ) _______

Primary care physician's name:

Physician's phone:

Physician's address:

HEALTH INSURANCE INFORMATION:

Policy holder's name and relationship to participant

Policy holder's address:

Please attach a photocopy of both sides of your insurance card OR complete the information requested below.

Insurance company name and address:

Insurance company phone number: ( ) _______

All policy numbers (please identify):

If you have HMO insurance, please list the emergency treatment authorization phone number: ( ) _______

Employer's name and address:

Business phone ( ) _______

INFORMATION NEEDED ABOUT PARTICIPANT: Please check yes or no. If yes, explain below or on another sheet if you need more room.

YES  NO

Does the participant have any chronic health problem or illness? ____________________________

Does he or she have any acute illness now? ____________________________

Has the person been treated recently for some medical problem? ____________________________

Does he or she have any allergies? ____________________________

Does he or she have any allergies to medication or local anesthetics? ____________________________

Date of his or her last tetanus shot ____________________________

List any medications he or she is now taking for treatment of any medical problem.

OFFICIAL AUTHORIZATION FOLLOWS:

I (parent or legal guardian), ____________________________, recognize that while attending this program, medical treatment on an emergency basis may be necessary for my child, and I further recognize that the program director may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the circumstances and to assume the expenses of such care. I also authorize the medical facility to release any and all information required to complete insurance claims and also authorize insurance payment directly to the medical facility.

Signature of Parent/Guardian or of participant aged 18 and up ____________________________ Date ____________________________
MICHIGAN STATE UNIVERSITY YOUTH PROGRAM
PARENT/GUARDIAN CONSENT FORM

I grant permission for (print participant's name) _________________________ to participate in all educational and social activities of the following MSU program or activity:

Program name: ____________________________________________

Program dates: ____________________________________________

MSU unit/department: ______________________________________

I understand that sessions may entail field trips and/or campus facility tours. I also understand that participants may engage in athletic or other recreational activities that have special risks.

I have read the session descriptions and approve of my child's selections. I accept any risks associated with the assigned sessions and selected recreational activities.

I understand that my child has a role to play as regards his or her safety and security. I will speak with my child about the need to honor safety rules and to behave responsibly.

(Please print):

__________________________________________
(Parent or legal guardian)

Signature: ___________________________ Date: ___________________________