



UNIVERSITY of VIRGINIA

OFFICE OF THE PRESIDENT

November 21, 2019

The Honorable Ralph Northam  
Governor of Virginia  
Post Office Box 1475  
Richmond, Virginia 23218  
c/o [clark.mercer@governor.virginia.gov](mailto:clark.mercer@governor.virginia.gov)

The Honorable Stephen D. Newman  
Chairman of the Senate Committee on Education and Health  
Senate of Virginia  
900 East Main Street  
Pocahontas Building, Room E604  
Richmond, Virginia 23219  
[district23@senate.virginia.gov](mailto:district23@senate.virginia.gov)

The Honorable Richard P. Bell  
Vice Chairman of the House Committee on Education  
Virginia House of Delegates  
900 East Main Street  
Pocahontas Building, Room E305  
Richmond, Virginia 23219  
[DelDBell@house.virginia.gov](mailto:DelDBell@house.virginia.gov)

Dear Governor Northam, Senator Newman, and Delegate Bell:

In accordance with § 23.1-401.1(D) of the Code of Virginia, the University of Virginia submits this report regarding our compliance with § 23.1-401.1, entitled “Constitutionally protected speech; policies, materials, and reports; report.”

The University of Virginia maintains a website, <https://freespeech.virginia.edu/>, with links to University policies and state regulations that are relevant to free speech, materials about these policies and regulations, and the process to report incidents involving the disruption of constitutionally protected speech. The University’s policies and regulations regarding constitutionally protected speech are featured at <https://freespeech.virginia.edu/policies-regulations>. These same policies and regulations are also included in the University’s online student handbook for undergraduate students at <http://records.ureg.virginia.edu/content.php?catoid=47&navoid=3411> and for graduate students at <http://records.ureg.virginia.edu/content.php?catoid=48&navoid=3541>. Materials on these policies and regulations in the form of Frequently Asked Questions (FAQs) also are featured on


this website at <https://freespeech.virginia.edu/faqs>. The homepage of this website prominently displays the reporting systems that our constituents may use to report an incident involving the disruption of constitutionally protected speech at <https://freespeech.virginia.edu/>.

The University of Virginia students, faculty, and staff, including those responsible for student discipline or education, are notified of these policy resources throughout the year via various communication streams such as the above mentioned websites, University's standard summer orientation program for all entering students, various student leadership groups' training and education, as well as training of our staff at the Office of the Dean of Students on the issues relating to freedom of speech and applicable policies.

To the best of my knowledge, only one complaint for an alleged violation of the First Amendment to the United States Constitution was filed against the University since December 1, 2018. This complaint is enclosed, and the University waived service of this complaint on September 30, 2019. University Counsel's Office believes the claims in this complaint are without merit, and University Counsel Tim Heaphy is available to respond to any questions you may have about this complaint.

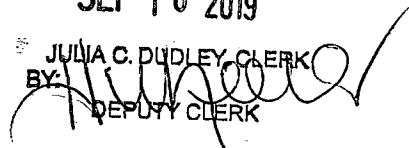
On behalf of the University, I am pleased to certify that the University has fulfilled the requirements in Virginia Code § 23.1-401.1, including developing materials on policies concerning constitutionally protected speech and notifying all employees who are responsible for the discipline or education of enrolled students of such materials.

Thank you for your service to the Commonwealth. Should you need additional information, please do not hesitate to contact me.

Best,  
  
James E. Ryan  
President

c: Timothy Heaphy, University Counsel  
J. J. Davis, Executive Vice President and Chief Operating Officer

SEP 16 2019

JULIA C. DUDLEY, CLERK  
BY:   
DEPUTY CLERK

IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF VIRGINIA

CHARLOTTESVILLE DIVISION

Kieran Ravi Bhattacharya,

Plaintiff,

v.

Rector and Visitors of the University of  
Virginia,

Defendant

Case No.: 3:19cv00054

JURY TRIAL DEMANDED

**PLAINTIFF'S COMPLAINT**

COMES NOW, Plaintiff Kieran Bhattacharya, for his Complaint, and states as follows:

1. Plaintiff Kieran Bhattacharya (hereinafter "Plaintiff"), is a United States Citizen and a resident of the State of Hawai'i. He matriculated as a medical student at the University of Virginia School of Medicine (hereinafter "SOM") in the Class lass of 2020 (hereinafter "SOM2020") on 4 August, 2016 and took a voluntary leave of absence on 7 February, 2017. Plaintiff joined the Class of 2021 (hereinafter "SOM2021") on 3 January, 2018 and was enrolled at SOM until he received a 1-year suspension for "unprofessionalism" from Academic Standards and Achievement Committee (hereinafter "ASAC") chairman Jim Tucker, MD (hereinafter "Dr. Tucker") on 29 November, 2018. Plaintiff is currently unemployed. Plaintiff is filing this Complaint as a pro se litigant.
2. The University of Virginia, an institution of higher education, was incorporated and created as a body politic to be known by the name "Rector and Visitors of the University of Virginia" (hereinafter "University").

3. Defendant University is a citizen of Virginia for purposes of diversity jurisdiction in that it has the power to sue and be sued, complain, and defend in all courts; it exercises autonomy over its operations; it does not perform traditional government functions; and any judgment against it would not be paid from the state treasury.
4. Original federal question jurisdiction of this Court is proper pursuant to Article III, § 2 of the United States Constitution and 28 U.S.C. § 1332 which provides that federal courts shall have jurisdiction where there is diversity of citizenship and the amount in controversy is greater than \$75,000.
5. Plaintiff matriculated to SOM and began the Fall 2016 Semester as a member of SOM2020 on 4 August, 2016.
6. During the Fall 2016 semester, Plaintiff participated in the SOM's mandated Social Issues in Medicine (hereinafter "SIM") course through shadowing and direct client contact at the Albemarle County Department of Social Services, Foster Care Unit. In the Agency Evaluation of Student (Exhibit 1.), Supervisor Beckie Aderholz reported that Plaintiff attended all scheduled sessions, conformed to expectations with respect to different metrics, and received no negative responses.
7. During the Fall 2016 semester, Plaintiff participated in Team-Based Learning (hereinafter "TBL") exercises and received five Student Performance Evaluations (hereinafter "SPE") from five medical students in Plaintiff's six-person TBL team for that semester. Three of five medical students rated Plaintiff's TBL performance as "Frequently exceeds expectations"; one medical student rated Plaintiff's TBL performance as "Meets and sometimes exceeds expectations"; and one medical student rated Plaintiff's TBL performance as "Meets expectations." All five of Plaintiff's SPEs from TBLs in the Fall

2016 Semester are included (Exhibit 2.) with this Complaint with redactions of any and all personal identifiers of each of the other five medical students in Plaintiff's TBL group.

8. During the Fall 2016 semester, Plaintiff participated in Clinical Performance Development (hereinafter "CPD") 1A and received one SPE (Exhibit 3.) from his CPD mentor, Andrew Wolf, MD (hereinafter "Dr. Wolf"). In this SPE, Dr. Wolf marked "Strongly Agree" with respect to the following assertions: "The student participates in and contributes to small group discussion"; "The student is willing to help others in the group"; "The student exhibits humanism, compassion, and empathy during small group discussion"; "The student demonstrates engagement in the SIM community service experience"; "The student demonstrates awareness of the political and economic forces that impact the delivery of health care"; and "The student demonstrates awareness of the socio-cultural forces that impact the delivery of health care."
9. On 18 December, 2016, Plaintiff completed the Fall 2016 semester in good academic standing while as a member of SOM2020.
10. Plaintiff began the Spring 2017 semester at SOM on 2 January, 2017 while as a member of SOM2020.
11. On 7 February, 2017, Plaintiff took a 1-year leave of absence (hereinafter "LOA") from SOM. On the University of Virginia Official Withdrawal Form (Exhibit 4.), Plaintiff cited his reason for withdrawal as "Personal."
12. During Plaintiff's LOA from SOM throughout the year 2017, Plaintiff authored and presented, in conjunction with one former SOM classmate, an abstract at the 4<sup>th</sup> Annual Symposium on Academic Interventional Radiology on 30 September, 2017 in Washington DC.

13. During Plaintiff's LOA from SOM throughout the year 2017, Plaintiff authored and presented, in conjunction with one former SOM classmate, a poster entitled "Characterization of trends in medical student indebtedness with current and potentially new repayment options for young physicians" at the Sixteenth Annual Medical Student Research Symposium at the University of Virginia School of Medicine on 7 November, 2017.
14. During Plaintiff's LOA from SOM throughout the year 2017, Plaintiff authored, in conjunction with one former classmate, "Endovascular Management of Acute Mesenteric Ischemia" and orally presented findings at the 43<sup>rd</sup> Annual Scientific Meeting of Society of Interventional Radiology on 19 March, 2018 in Los Angeles, California.
15. During Plaintiff's LOA from SOM throughout the year 2017, Plaintiff authored a textbook chapter entitled "Special Considerations: Revision Anterior Cruciate Ligament," for which he received first authorship in the first edition of the textbook, "ACL Injuries in Female Athletes" in the year 2018. This textbook was published in the year 2018.
16. During Plaintiff's LOA from SOM throughout the year 2017, Plaintiff authored a textbook chapter entitled "Head and Spine Diagnosis and Decision Making," for which he received first authorship in the Fifth Edition of "DeLee, Drez, and Miller's Orthopaedic Sports Medicine" in the year 2018. The textbook was published in the year 2019.
17. During Plaintiff's LOA from SOM throughout the year 2017, Plaintiff edited and contributed to the manuscript "Endovascular Management of Acute Mesenteric Ischemia," for which he received second authorship after it was accepted for publication in "Annals of Gastroenterology" on 13 August, 2019.

18. Plaintiff returned to SOM on 3 January, 2018 to begin the Spring 2018 semester as a member of SOM2021.
19. During the Spring 2018 semester, Plaintiff participated in TBL exercises and received five SPEs from five medical students in Plaintiff's six-person TBL. Three of the five medical students rated Plaintiff's TBL performance as "Frequently exceeds expectations"; and two medical students rated Plaintiff's TBL performance as "Meets and sometimes exceeds expectations." All five complete SPEs from the Spring 2018 Semester are included (Exhibit 5.) with this Complaint with redactions of any and all personal identifiers each of the other five medical students in the TBL group.
20. During the Spring 2018 semester, Plaintiff participated in CPD 1B and received one SPE (Exhibit 6.) from his CPD mentor, James Moak, MD (hereinafter "Dr. Moak").
21. A "Professionalism Concern Card" at SOM is punitive administrative action taken against medical students for a variety of forms of misconduct, including but not limited to unexcused absences and violations in professionalism. According to SOM's Policy on Academic and Professional Enhancement (Exhibit 7.), "Any breach of professionalism resulting in a recorded observation, e.g., Professionalism Concern Card, letter, written report, etc., must be addressed with the student by their college dean and documentation of the discussion must be recorded."
22. At 10:52 AM on 4 May, 2018, during the Spring 2018 semester, Plaintiff received a Professionalism Concern Card (Exhibit 8.) from an Attendance Monitor, who commented that "Student did not attend the required Patient Presentation on May 2, 2018."
23. In the Professionalism Concern Card issued against Plaintiff by Attendance Monitor on 4 May, 2018, Attendance Monitor reports that he or she did not notify Plaintiff of this

concern card; that he or she did not feel uncomfortable in reporting this concern card to Plaintiff; and that he or she did request to be contacted about the action taken. Plaintiff was not made aware of having received this Professionalism Concern Card until after receiving his medical student file more than six and a half months later on 20 December, 2018.

24. Plaintiff reports that he did attend the 2 May, 2018 patient presentation, but that he was not tallied as present due to a lapse in Plaintiff's subscription of SOM's attendance technology.
25. Attendance at SOM is monitored using a "Turning Point Login," the subscription service for which had expired at the time for the Plaintiff due to his LOA during the year 2017. Plaintiff was notified by Dr. Mary Kate Warden (hereinafter "Dr. Warden"), a "system leader" for the area of study for which the Patient Presentation was focused, and Plaintiff promptly resolved the issue with SOM's technical support.
26. Despite resolving the issue and communicating the resolution with Dr. Warden, Plaintiff reports that the Attendance Monitor did not rescind the Professionalism Concern Card against Plaintiff.
27. Plaintiff reports having no recollection of discussion or notification of the aforementioned Professionalism Concern Card with his then college dean, John J. Densmore, MD, PhD (hereinafter "Dr. Densmore") or any other faculty or staff member. Furthermore, there is no evidence of notification to or discussion of this Professionalism Concern Card to Plaintiff in his student file.
28. On 27 May, 2018, Plaintiff completed the Spring 2018 semester at SOM in good academic standing while as a member of SOM2021.



29. On 30 July, 2018, Plaintiff began the Fall 2018 semester at SOM while as a member of SOM2021.
30. At noon on 25 October, 2018, Plaintiff attended a SIM discussion entitled “Microaggressions: Why are “They” So Sensitive?” led by Beverly Colwell Adams, PhD (hereinafter “Dr. Adams”) and hosted by the SOM chapter of the American Medical Women’s Association (hereinafter “AMWA”). Plaintiff participated in a 5 minute and 20 second discussion with two panel speakers, Dr. Adams and Sarah K. Rasmussen, MD, PhD (hereinafter “Dr. Rasmussen”), during a designated question and answer session.
31. The entire 1-hour SIM discussion is included in this complaint (Exhibit 9.). Plaintiff participates in discussion with two panel speakers, Dr. Adams and Dr. Rasmussen, between 28:40 and 34:00 of the one-hour session.
32. At 2:59 PM on 25 October, 2018, Christine M Peterson, MD (hereinafter “Dr. Peterson”), a gynecologist and one of four “college deans” at SOM, sent Plaintiff the following email (Exhibit 10.): “Kieran, I was at the noontime “Microaggressions” panel today and observed your discomfort with the speaker’s perspective on the topic. Would you like to come share your thoughts with me? I think I can provide some perspective that will reassure you about what you are and are not responsible for in interactions that could be uncomfortable even when that’s not intended. If you’d prefer to talk with your own college dean, that’s fine too. I simply want to help you understand and be able to cope with unintended consequences of conversations. Dr. Peterson”
33. Plaintiff agreed to meet with Dr. Peterson at her office at 4 PM on 31 October, 2018.
34. At 9:04 PM on 25 October, 2018, Nora Kern, MD (hereinafter “Dr. Kern”), a Urologist at SOM, issued a Professionalism Concern Card (Exhibit 11.) against Plaintiff. Dr. Kern

was the third member on the speaking panel of the SIM discussion and called on Plaintiff to ask questions during the discussion; and at no time during the 5 minutes and 20 second discussion involving Plaintiff, Dr. Adams, and Dr. Rasmussen did Dr. Kern directly address the Plaintiff or his line of questioning as inappropriate.

35. In support of the Professionalism Concern card against Plaintiff, Dr. Kern cites relevance in the following two areas: “Respect for Others” and “Respect for Differences.”
36. Dr. Kern refers to Plaintiff as “this student” and “med student” in the following description in support of the Professionalism Concern Card: “For a AMWA session, we held a panel on micro aggression. Myself and 2 other faculty members were invited guests. This student asked a series of questions that were quite antagonistic toward the panel. He pressed on and stated one faculty member was being contradictory. His level of frustration/anger seemed to escalate until another faculty member defused the situation by calling on another student for questions. I am shocked that a med student would show so little respect toward faculty members. It worries me how he will do on wards.”
37. The supporting commentary from Dr. Kern in her Professionalism Concern Card against Plaintiff does not directly quote Plaintiff, Dr. Rasmussen, or Dr. Adams from the 5 minutes and 20 seconds of available audio discussion amongst these three individuals.
38. Dr. Kern reports in the Professionalism Concern Card at 9:04 PM on 25 October, 2018 that she has not discussed her concerns with Plaintiff and further discloses that she does not feel uncomfortable discussing her concerns with Plaintiff. Moreover, Dr. Kern makes no indication that she has reported her issuance of a Professionalism Concern Card against Plaintiff with anyone other than Katherine Yates (hereinafter “Ms. Yates”), the registrar at SOM and standard recipient of the concern card notifications through som-

studentaffairs@virgina.edu. This Professionalism Concern Card was not made available to Plaintiff until after receiving his medical student file approximately 56 days later on 20 December, 2018.

39. Plaintiff reports no recollection of ever having being notified in person by Dr. Kern of the Professionalism Concern Card issued solely by Dr. Kern against Plaintiff. Furthermore, Plaintiff reports no recollection of ever speaking directly to or having been spoken directly to in person by Dr. Kern at any time during his enrollment at SOM. Finally, Plaintiff reports no recollection of contacting directly or having been contacted directly by Dr. Kern for any reason during his enrollment at SOM. Dr. Kern does not name Plaintiff directly by first or last name in the supporting commentary of the Professionalism Concern Card.
40. At 1:12 PM on 26 October, 2018, Dr. Densmore sent the following e-mail (Exhibit 12.) to Plaintiff: "Hi Kieran, I just wanted to check in and see how you are doing. I hope the semester is going well. I'd like to meet next week if you have some time. JJD"
41. Plaintiff agreed to meet with Dr. Densmore at noon on 1 November, 2018.
42. As had been previously agreed upon, Plaintiff met with Dr. Peterson in Dr. Peterson's office at 4 PM on 31 October, 2018 for approximately 1 hour. Plaintiff reports recollection of having discussed a variety of social and political topics with Dr. Peterson, including but not limited to the topic of microaggressions.
43. Plaintiff reports no recollection of ever having been told by Dr. Peterson during this hour-long interaction that Dr. Kern had issued a Professionalism Concern Card against Plaintiff at 9:04 PM on 25 October, 2018 as a result of the Plaintiff's participation in the SIM discussion on microaggressions between noon and 1 PM on 25 October, 2018.

Moreover, there is no documented report in Plaintiff's student file of Dr. Peterson's communicating to Plaintiff that he had received a Professional Concern Card from Dr. Kern as a result of Plaintiff's participation in the 25 October, 2018 SIM discussion on microaggressions.

44. As had been previously agreed upon, Plaintiff met with Dr. Densmore in Dr. Densmore's personal office at noon on 1 November, 2018 for approximately 10 minutes. Plaintiff reports having a brief discussion with Dr. Densmore about study strategies for SOM's "summative exams" and the United States Medical Licensing Exam (hereinafter "USMLE") Step 1, which Plaintiff was scheduled to take on 1 February, 2019.
45. Plaintiff reports no recollection of having being informed by Dr. Densmore during this 1 November, 2018 meeting that Dr. Kern had issued a Professionalism Concern Card against Plaintiff at 9:04 PM on 25 October, 2018 as a result of the Plaintiff's participation in the 25 October, 2018 SIM discussion on microaggressions. Furthermore, there is no documented report in Plaintiff's medical student file that Dr. Densmore had communicated to Plaintiff that Dr. Kern had issued a Professionalism Concern Card against Plaintiff as a result of Plaintiff's participation in the 25 October, 2018 SIM discussion on microaggressions.
46. After meeting with Dr. Densmore in Dr. Densmore's personal office at noon on 1 November, 2018, Plaintiff reports having been under the impression that there were no Professionalism Concern Cards in his student file. However, two Professionalism Concern Cards had been placed in Plaintiff's student file at the time of the 1 November, 2018 meeting with Dr. Densmore, and no faculty member or employee of SOM is documented to have informed Plaintiff of and/or discussed with Plaintiff these two

serious, punitive administrative decisions. As previously mentioned, in the Professionalism Concern Card (Exhibit 8.) issued against Plaintiff by an “Attendance Monitor” at 10:52 AM on 4 May, 2018 and in the Professionalism Concern Card (Exhibit 11.) issued by Dr. Kern at 9:04 PM on 25 October, 2018, neither the Attendance Monitor nor Dr. Kern report feeling uncomfortable discussing their concerns with Plaintiff. Nonetheless, there is no evidence in Plaintiff’s student file that that either the Attendance Monitor or Dr. Kern ever explicitly reported either or both punitive administrative actions to Plaintiff. Moreover, there is no evidence in Plaintiff’s student file that either the Attendance Monitor or Dr. Kern made any effort to delegate the task of explicitly reporting either or both of these Professionalism Concern Cards to Plaintiff at any time during Plaintiff’s enrollment at SOM.

47. In room “MR 5 3005” at 4:03 PM on 14 November, 2018, a meeting of the University of Virginia School of Medicine Academic Standards and Achievement Committee (hereinafter “SOM ASAC”) was called to order. The meeting was adjourned at 5:18 PM on 14 November, 2018. Minutes of the 14 November, 2018 SOM ASAC meeting were respectfully submitted by Ms. Yates on 27 November, 2018 (Exhibit 13.).
48. At the 14 November, 2018 SOM ASAC meeting, Ms. Yates tallied twelve voting committee members as “present.” In this Complaint, each of these twelve committee members will be listed numerically in the order that each individual was listed by Ms. Yates with each committee member’s name; each committee member’s position at SOM on or around 14 November, 2018 to the best of Plaintiff’s knowledge; and whatever the Plaintiff feels necessary to include about each committee member’s position to provide this Court with what Plaintiff believes to be a sensitive and specific representation of the

SOM ASAC's published "Academic Standards and Achievement Committee Operating Procedures." (Exhibit 14.)

49. Committee member #1 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Jim B. Tucker, MD. Dr. Tucker's publicly available biography (Exhibit 15.) discloses that he received Board Certification in General Psychiatry and Child and Adolescent Psychiatry by the American Board of Psychiatry and Neurology (hereinafter "ABPN") in 1992 and that he is currently a Professor of Psychiatry at SOM.

50. The SOM Office of Student Affairs discloses in its publicly available list of ASAC committee members (Exhibit 16.) that Dr. Tucker is the Chair of the SOM ASAC and that he has held this position since on or before the year 2017 and will retain this position until on or after the year 2020. In accordance with Section II of the operating procedures of SOM ASAC, Dr. Tucker was qualified as a voting member of SOM ASAC during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of any direct contact with Dr. Tucker on or before 14 November, 2018.

51. Committee member #2 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Brian Behm, MD (hereinafter "Dr. Behm"). Dr. Behm's publicly available biography (Exhibit 17.) discloses that he received Board Certification in Internal Medicine and Gastroenterology by the American Board of Medical Specialties (hereinafter "ABMS"), retains a title of Associate Professor at SOM, and is described as a gastroenterologist. The SOM Office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Behm has been an SOM ASAC committee member since on or before the year 2017 and will retain this position until on or after the

year 2020; however, Dr. Behm is currently listed as “On Leave” from the SOM ASAC for reasons unbeknownst to Plaintiff. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Behm was qualified as a voting member of SOM ASAC during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of any direct contact with Dr. Behm on or before 14 November, 2018.

52. Committee member #3 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Donna Chen, MD, MPH (hereinafter “Dr. Chen”). Dr. Chen’s publicly available biography (Exhibit 18.) discloses that she received Board Certification in Psychiatry by ABPN in 2001 and retains the following titles at SOM: Associate Professor in Psychiatry and Associate Professor in Health Evaluation Sciences. The SOM Office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Chen has been an SOM ASAC member since on or before the year 2017 and will retain this position until on or after the year 2020. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Chen was qualified as a voting member of SOM ASAC during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had recollection of numerous instances of direct contact with Dr. Chen in the context of medical ethics lectures while Plaintiff was enrolled at SOM.

53. Committee member #4 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Stephen Culp, MD, PhD (hereinafter “Dr. Culp”). Dr. Culp’s publicly available biography (Exhibit 19.) discloses that he received Board Certification in Urology by ABMS and retains the title of Associate Professor of Urology at SOM. The

SOM Office of Student Affairs does not currently disclose Dr. Culp as a SOM ASAC member in its publicly available list of ASAC committee members. Nonetheless, Dr. Culp was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of any direct contact with Dr. Culp on or before 14 November, 2018.

54. Committee member #5 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Pamila Herrington, MD (hereinafter “Dr. Herrington”). Dr. Herrington’s publicly available biography (Exhibit 20.) discloses that she received Board Certification in Psychiatry and Neurology-Psychiatry by ABPN in 1998 and that she retains the title of Assistant Professor of Psychiatric Medicine at SOM. The SOM Office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Herrington has been an SOM ASAC member since on or before the year 2019 and will retain this position until on or after the year 2022. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Herrington was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had recollection of multiple instances of direct contact with Dr. Herrington.
55. Committee member #6 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Nicholas Intagliata, MD (hereinafter “Dr. Intagliata”). Dr. Intagliata’s publicly available biography (Exhibit 21.) discloses that he has received Board Certification in Internal Medicine, Gastroenterology, and Transplant Hepatology by ABMS. The SOM Office of Student Affairs discloses in its publicly available list of



ASAC committee members that Dr. Intagliata has been an ASAC committee member since on or before the year 2018 and will retain this position until on or after the year 2021. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Intagliata was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of direct contact with Dr. Intagliata on or before 14 November, 2018.

56. Committee member #7 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Nora Kern, MD. Dr. Kern's publicly available biography (Exhibit 22.) discloses that she received Board Certification in Urology by the American Board of Urology (hereinafter "ABU") and retains the title of Assistant Professor of Urology at SOM. The SOM Office of Student Affairs does not currently list Dr. Kern in its publicly available list of ASAC committee members. Nonetheless, Dr. Kern was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. As mentioned previously, at the time of this pleading, Plaintiff reports having had no recollection of direct contact with Dr. Kern; however, Dr. Kern was present at the SIM discussion on microaggressions and did issue a Professionalism Concern Card against Plaintiff at 9:04 PM on 25 October, 2018.
57. Committee member #8 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Wilson Miller, PhD. Dr. Miller's publicly available biography (Exhibit 23.) discloses that he holds the title of Assistant Professor of Radiology and Medical Imaging at SOM. The SOM Office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Miller has been an ASAC committee

member since on or before the year 2018 and will retain this position until on or after the year 2021. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Miller was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of any direct contact with Dr. Miller on or before 14 November, 2018.

58. Committee member #9 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Barnett R Nathan, MD (hereinafter "Dr. Nathan"). Dr. Nathan's publicly available biography (Exhibit 24.) discloses that he received Board Certification in Neurology, Vascular Neurology, and Neurocritical Care by ABMS. The SOM Office of Student Affairs does not currently list Dr. Nathan in its publicly available list of ASAC committee members. Nonetheless, Dr. Nathan was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of direct contact with Dr. Nathan on or before 14 November, 2018.
59. Committee member #10 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Catherine Shaffrey, MD. Dr. Shaffrey's publicly available biography (Exhibit 25.) discloses that she received Board Certification in Anesthesiology by ABMS in 1996 and currently holds the title of Assistant Professor of Anesthesiology at SOM. The SOM Office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Shaffrey has been an ASAC committee member since on or before the year 2018 and will retain this position until on or after the year 2021. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Shaffrey was

designated as a qualified voting member of SOM ASAC by Ms. Yates during the 14 November, 2018 SOM ASAC meeting. At the time of this pleading, Plaintiff reports having had no recollection of direct contact with Dr. Shaffrey on or before 14 November, 2018.

60. Committee members #11 and #12 tallied by Ms. Yates as present at the 14 November, 2018 SOM AASC meeting were medical students at SOM. Under Section II of ASAC operating procedures, two fourth year medical students serve 1-year terms as ex-officio voting members of SOM ASAC. Plaintiff reports having had no recollection of direct contact with either of these two medical students on or before 14 November, 2018.
61. At the 14 November, 2018 SOM ASAC meeting, Ms. Yates tallied 4 individuals, including herself, as “Non-voting members.” In this Complaint, each of these 4 non-voting members will be listed numerically in the order each individual was listed by Ms. Yates with each member’s name; each individual’s position at SOM on or around 14 November, 2018 to the best of Plaintiff’s knowledge; and whatever the Plaintiff feels necessary to include about each member’s position to provide this Court with what the Plaintiff believes to be a sensitive and specific representation of the SOM ASAC’s published “Academic Standards and Achievement Committee Operating Procedures.”
62. Non-voting member #1 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Megan Bray, MD (hereinafter “Dr. Bray”). Dr. Bray’s publicly available biography (Exhibit 26.) discloses that she received Board Certification in Obstetrics and Gynecology by ABMS and holds the title of Associate Professor. Pursuant to Section II of operating procedures of SOM ASAC, Dr. Bray was not a qualified voting

member during the 14 November, 2018 SOM ASAC meeting. Plaintiff reports having had no recollection of direct contact with Dr. Bray on or before 14 November, 2018.

63. Non-voting member #2 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Lesley Thomas (hereinafter “Ms. Thomas”). Ms. Thomas holds the title of Assistant Dean for Medical Education, and based on publicly available information from SOM’s webpage on “Medical Student Advocacy,” (Exhibit 27.) serves as a vocational vector for what can include ex parte, anonymous, and unverifiable reports involving “sexism, racism, harassment, discrimination, verbal abuse, and other types of unprofessional behavior directed at students.” Plaintiff reports having had no recollection of any direct contact with Ms. Thomas on or before 14 November, 2018.
64. Non-voting member #3 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Selina Noramly, PhD (hereinafter “Dr. Noramly”). Dr. Noramly’s publicly available biography (Exhibit 28.) discloses that she holds the title of Director of Academic Enhancement at SOM. Plaintiff reports having had recollection of direct contact with Dr. Noramly on one occasion before 14 November, 2018 in October 2016 to discuss study strategies for medical school exams.
65. Non-voting member #4 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Katherine Yates herself. The SOM Office of Student Affairs contact list (Exhibit 29.) discloses that Ms. Yates is the SOM registrar and should be contacted for “Clerkship Scheduling, Enrollment, Leaving and Returning from the University.” Plaintiff recalls having had direct contact with Ms. Yates before 14 November, 2018 when Plaintiff withdrew from SOM at Defendant University on 7 February, 2017.

66. At the 14 November, 2018 SOM ASAC meeting, Ms. Yates tallied 4 individuals as “Guests.” In this complaint, each of these 4 Guests will be listed numerically in the order each individual was listed by Ms. Yates with each member’s name; each individual’s position at SOM on or around 14 November, 2018 to the best of Plaintiff’s knowledge; and whatever the Plaintiff feels necessary to include about each member’s position to provide this Court with what the Plaintiff believes to be a sensitive and specific representation of the SOM ASAC’s published “Academic Standards and Achievement Committee Operating Procedures.”
67. Guest #1 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was David Charles Lewis, who is referred to by a “UVA PUBLIC PEOPLE SEARCH” (Exhibit 30.) as Business Intelligence Lead. Plaintiff reports having had no recollection of any direct contact with David Charles Lewis on or before 14 November, 2018.
68. Guest #2 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Lynne Fleming (hereinafter “Ms. Fleming”). Publicly available biography (Exhibit 31.) discloses Ms. Fleming as Associate University Counsel at The Office of the University Counsel at Defendant University. Ms. Fleming has been a member of University Counsel’s Office since 2001.
69. Guest #3 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Dr. Peterson. Publicly available biography (Exhibit 32.) discloses that Dr. Peterson received Board Certification in Obstetrics and Gynecology by ABMS in 1982 and holds the titles of Assistant Dean for Medical Education and Associate Professor of Obstetrics and Gynecology at SOM. As mentioned previously, Plaintiff had first met in person with Dr. Peterson in her personal office at 4 PM on 31 October, 2018 per Dr. Peterson’s

request. Plaintiff reports having had no recollection of any other interactions with Dr. Peterson between on or after 5 PM on 31 October, 2018 and on or before 4 PM on 14 November, 2018.

70. Guest #4 tallied by Ms. Yates as present at the 14 November, 2018 SOM ASAC meeting was Sean Reed, MD (hereinafter Dr. Reed). Publicly available biography (Exhibit 33.) discloses that Dr. Reed received Board Certification in Family Medicine by the American Board of Family Medicine and holds the title of Associate Professor at SOM. Plaintiff reports having had no recollection of any direct contact with Dr. Reed on or before 14 November, 2018.
71. During the 14 November, 2018 SOM ASAC meeting, Ms. Yates tallied a total twelve voting committee members; four non-voting committee members, and four guests as present. Plaintiff reports having had no recollection of any direct contact on or before 14 November, 2018 with ten of the twelve voting committee members present at the 14 November, 2018 SOM ASAC meeting; no recollection of any direct contact on or before 14 November, 2018 with two of the four non-voting committee members present at the 14 November, 2018 SOM ASAC meeting; and no recollection of any direct contact on or before 14 November, 2018 with three of the four guests present at the 14 November, 2018 SOM ASAC meeting.
72. During the 14 November, 2018 SOM ASAC meeting, Ms. Yates reports the following as a “Professionalism Issue” (Exhibit 34.): “Kieran Bhattacharya (Densmore) concern card for professionalism – From the reporter: ‘For a AMWA session, we held a panel on micro aggression. I and 2 other faculty members were invited guests. This student asked a series of questions that were quite antagonistic toward the panel. He pressed on and stated one

faculty member was being contradictory. His level of frustration/anger seemed to escalate until another faculty member defused the situation by calling on another student for questions. I am shocked that a med student would show so little respect toward faculty members. It worries me how he will do on wards. – One prior concern card (attendance of a mandatory activity).”

73. The punitive action against Plaintiff recorded by Ms. Yates at the 14 November, 2018 SOM ASAC occurred approximately three weeks prior. There is no evidence from minutes by Ms. Yates that there was any amount of deliberation or discussion regarding the topic of microaggressions during the meeting itself. Moreover, the Professionalism Issue reported to SOM ASAC by Dr. Kern, who herself was an SOM ASAC committee member, reads in exact verbatim as to what Dr. Kern had placed in the supporting commentary for the Professionalism Concern Card that she and only she had written in support of her furtive, punitive utilization of administrative action against Plaintiff.
74. During the 14 November, 2018 SOM ASAC meeting, Ms. Yates records the following (Exhibit 13.): “Professionalism Issues – The committee voted unanimously to send Kieran Bhattacharya (Densmore) a letter reminding him of the importance in medicine to show respect to all: colleagues, other staff, and patients and families.”
75. In accordance with Section II of the operating procedures of SOM ASAC and the aforementioned tallies by Ms. Yates, a unanimous vote by the SOM ASAC committee on 14 November, 2018 includes votes by the following individuals: Drs. Jim Tucker, Brian Behm, Donna Chen, Stephen Culp, Pamela Herrington, Nicholas Intagliata, Nora Kern, Wilson Miller, Barnett Nathan, Catherine Shaffrey, and two fourth year medical students.

76. The unanimous vote by SOM ASAC was intended to send an e-mail reminder to Plaintiff, who at the time was a medical student at SOM, to remind Plaintiff of the importance in medicine to show respect to all. The four entities listed under “all” in the joint statement voted unanimously on by SOM ASAC include the following: colleagues, other staff, and patients and families. This declarative list does not include a reminder to show respect to medical students. Furthermore, at no point during Plaintiff’s participation with two SOM faculty members in a 5 minute and 20 seconds discussion of microaggressions did Plaintiff interact with patients, families, or other staff not generally considered to be faculty members.
77. There exists no documentation in Plaintiff’s student file of Plaintiff’s showing disrespect to patients, families, or staff not generally considered to be faculty members.
78. There was no documented effort by any of the 20 individuals present at the 14 November, 2018 ASAC meeting to listen to the available audio of the 25 October, 2018 SIM discussion on microaggressions.
79. There was no documented effort by any of the 20 individuals present at the 14 November, 2018 ASAC meeting to explicitly notify Plaintiff by any means that Dr. Kern had issued a Professionalism Concern Card against Plaintiff at 9:04 PM on 25 October, 2018.
80. At 10:36 AM on 15 November, 2018, Dr. Tucker attached the following letter, dated on 15 November, 2018 (Exhibit 35.) in an email (Exhibit 35.B.): “Dear Mr. Bhattacharya: The Academic Standards and Achievement Committee has received notice of a concern about your behavior at a recent AMWA panel. It was thought to be unnecessarily antagonistic and disrespectful. Certainly, people may have different opinions on various issues, but they need to express them in appropriate ways. It is always important in



medicine to show respect to all: colleagues, other staff, and patients and their families.

We would suggest that you consider getting counseling in order to work on your skills of being able to express yourself appropriately. Sincerely, Jim B Tucker, MD.”

81. Dr. Tucker’s recommendation of counseling to Plaintiff in the 15 November, 2018 letter on behalf on SOM ASAC was not included in the reminder that was unanimously voted upon by the SOM ASAC committee members on 14 November, 2018 according to minutes taken by Ms. Yates.
82. In Dr. Tucker’s recommendation of counseling to Plaintiff on 15 November, 2018, Dr. Tucker fails to report to Plaintiff that “it” was specifically Dr. Kern and Dr. Kern only who viewed Plaintiff’s conduct as “antagonistic.”
83. In Dr. Tucker’s recommendation of counseling to Plaintiff on 15 November, 2018, Dr. Tucker fails to report to Plaintiff that Dr. Kern issued a Professionalism Concern Card against Plaintiff at 9:04 PM on 25 October, 2018.
84. To the best of Plaintiff’s knowledge, Dr. Kern was the only individual who was percipient witness of the SIM discussion on 25 October, 2018 and also a percipient witness of and voting member at the SOM ASAC meeting on 14 November, 2018.
85. At 5:45 PM on 26 November, 2018, Dr. Densmore sent the following email (Exhibit 36.) to Plaintiff: “Hi Kieran, I hope you’re doing well. We were notified by the Dean of Students Office that you were heading back to Charlottesville. You will need to be seen by CAPS before you can return to classes. Let me know if you have questions. Best regards, JJD.”
86. The acronym “CAPS” referenced by Dr. Densmore was understood at the time by Plaintiff to be “Counseling and Psychological Services” at the Elson Student Health

Center of Defendant University. Furthermore, it was understood by the Plaintiff at the time that any individual receiving treatment from Counseling and Psychological Services (hereinafter “CAPS”) at Defendant university would be required to provide CAPS with expressed written consent to treatment.

87. Dr. Densmore’s publicly available biography (Exhibit 37.) discloses that he has Board Certification in Internal Medicine; Hematology; and Medical Oncology by ABMS and holds the following two titles at SOM of Defendant University: Associate Professor of Internal Medicine and Associate Dean for Admissions and Student Affairs. Moreover, Dr. Densmore serves as a one of the four college deans for “Hunter College,” of which Plaintiff was a member of while enrolled at SOM.
88. In response to Dr. Densmore’s email (Exhibit 36.) to Plaintiff at 5:45 PM PM on November 26, 2018, Plaintiff sent the following email (Exhibit 36.) to Dr. Densmore at 5:00 AM on 27 November, 2018: “How can it be legal to mandate psychiatric evaluations to continue my education? ‘Public colleges responding to clearly protected expressions by prescribing mandatory counseling or psychological evaluation violates both students’ rights to free speech and private conscience.’ – Kelly Sarabyn, FIRE (Foundation for Individual Rights in Education)”
89. The Foundation for Individual Rights in Education (hereinafter “FIRE”) was founded in 1999 and describes its mission (Exhibit 38.) as to “defend and sustain individual rights of students and faculty members at America’s colleges and universities. These rights include freedom of speech, freedom of association, due process, legal equality, religious liberty, and sanctity of conscience.”

90. Kelly Sarabyn, an author for and contributor to FIRE, from her 31 December, 2007 article (Exhibit 39.) entitled “Colleges, Mandatory Counseling, and the Right of Private Conscience,” penned the following excerpt: “Public colleges responding to clearly protected expressions by prescribing mandatory counseling or psychological evaluation violates both students’ rights to free speech and private conscience. Unlike a suspension from school, which offends a student’s right to free speech, ordering psychological counseling for protected speech compounds the offense to the Constitution by violating both a student’s right to free speech and his right to private conscience.”
91. At 11:48 AM on 27 November, 2018, Randolph J. Canterbury, MD (hereinafter “Dr. Canterbury”) sent the following email (Exhibit 40.) entitled “Required process to attend class” to Plaintiff: “Dear Kieran, I have heard from Dr. Densmore that you have been calling him about your desire to return to classes today. You are not cleared to return to class until you have been evaluated by CAPS at the Student Health Service. Do not attend your CPD group today. Make an appointment with CAPS to initiate the medical clearance process. Best regards, R. J. Canterbury, M.D.”
92. Dr. Canterbury’s publicly available biographies (Exhibit 41.) disclose that he received Board Certification in Internal Medicine in 1983 by ABMS and Board Certification in Psychiatry in 1985 and Addiction medicine in 1991 by ABPN. Dr. Canterbury holds the titles of Professor of Psychiatric Medicine and Internal Medicine as well as Senior Associate Dean for Education at SOM of Defendant University.
93. At the time of this Complaint and at the time of receiving the aforementioned email from Dr. Canterbury at 11:48 AM on 27 November, 2018, Plaintiff does not and did not have

any understanding or awareness as to what “medical clearance process” was referenced by Dr. Canterbury in Dr. Canterbury’s email to Plaintiff.

94. At 1:00 PM on 28 November, 2018, Ms. Yates sent the following email (Exhibit 42.) to Plaintiff, “Hello Kieran, The Academic Standards and Achievement Committee will be meeting today to discuss your current enrollment status. You are invited to attend to share your insights with the committee. The meeting will take place at 5:00 in the Claude Moore Medical Education Building, in room G 165. Please arrive at 5:00. The meeting has some business to attend to before they have questions for you, so we will have someone waiting to let you know when they are ready for you. Please reply and let us know if you will be in attendance. Thank you, Katherine M. Yates”
95. At 1:28 PM on 28 November, 2018, Plaintiff sent the following email (Exhibit 43.) to Ms. Yates: “Who exactly will be present? Do you normally just give students 3 hours to prepare after indirectly threatening to kick them from medical school? Why exactly is my enrollment status up for discussion?”
96. At 1:37 PM, on 28 November, 2018, 203 minutes before 5:00 PM, 28 November, 2018, Ms. Yates sent the following email (Exhibit 44.) to Plaintiff: “Hello, Here is the information about the committee’s make up policies, and procedures:  
<https://med.virginia.edu/student-affairs/policies/academic-standards-and-achievement-committee-operating-procedures/>  
<https://med.virginia.edu/student-affairs/policies/academic-standards-achievement-policy/>  
<https://med.virginia.edu/school-administration/standing-committees/academic-standards-and-achievement-committee/>  
Regards, Katherine”

97. Per the concluding portion of the introductory paragraph of the Academic Standards and Achievement Committee Operating Procedures (Exhibit 14.), “Comprised of faculty in the school of medicine who do not assign final grades to students as well as student representatives, the role of ASAC is to promote students who meet these required standards, to recommend remedial action for those who do not meet the standards, and to suspend or recommend dismissal of those students who are incapable or who choose not to meet the required standards of achievement within the time frame allotted for completion of the M.D. degree.” This introduction of this document goes on to declare: “It is the policy of the School of Medicine to give every qualified and committed student the opportunity to graduate; however, the School reserves the right, in its sole and absolute discretion, to make judgments about who has or has not demonstrated the necessary qualification to earn a degree and to practice medicine competently.”
98. Section III.A. of the Academic Standards and Achievement Committee Operating Procedures (Exhibit 14.) states as follows: “Official votes may be taken when a quorum (greater than 50% of the voting members) is present. All motions, except for a motion of dismissal, shall pass by a majority of voting members present. A motion for dismissal requires a two-thirds majority of voting members. Voting members will be recused from participating and shall not be counted in the quorum if they have (or have had) a personal, mentoring, or advising relationship with the student beyond that of usual student-faculty contact in class or clinical environment. This restriction includes faculty mentors on research projects, family members, anyone with a physician-patient relationship with the student or other personal relationship.”

99. Section III.D. of the Academic Standards and Achievement Committee Operating Procedures (Exhibit 14.) states as follows: “When there are severe professional transgressions or the Committee is to consider serious actions such as suspension or dismissal of a student, a final vote should be taken only after the student has been offered an opportunity to address the Committee in person, and to respond to questions from members of the Committee. Also, the student should be notified by the Committee in writing as to what the major concerns of the Committee are likely to be during the coming meeting. Assistant Deans for Student Affairs (College Deans) as well as relevant teaching faculty may also be invited to attend committee meetings to provide information.”
100. The beginning portion of Section III.H. of the Academic Standards and Achievement Committee Operating Procedures (Exhibit 14.) states as follows: “When a student addresses the Committee, the student will act as his or her own advocate.”
101. Section III.J. of the Academic Standards and Achievement Committee Operating Procedures (Exhibit 14.) states as follows “Guidelines and policies written in advance cannot cover all possible scenarios. When in doubt, the Committee should be guided by several important general principles, including: fairness to students; following due process; promptness of action and notification; maintaining confidentiality when possible; and, balancing the best interests of each student with its obligations to the Faculty, patients and to society to train graduates who demonstrate the highest standards or academic performance and conduct.”
102. Paragraph 3 of the “Professionalism” subsection of SOM’s Policy on Academic and Professional Advancement (Exhibit 7.) states as follows: “Any breach of professionalism

resulting in a recorded observation, e.g., Professionalism Concern Card, letter, written report, etc., must be addressed with the student by their college dean and documentation of the discussion must be recorded.”

103. When Plaintiff had received an email from Ms. Yates at 1:00 PM on 28 November, 2018, Plaintiff had received no specific written notice or documented address from his college dean or anyone else that he had received either or both of the Professionalism Concern Cards that were in his student file at the time.
104. Although Section III.D. of ASAC operating procedures states that in instances in which the Committee is to consider serious actions such as suspension or dismissal of the student, “the student should be notified by the Committee in writing as to what the major concerns of the Committee are likely to be during the coming meeting,” Plaintiff received no written notification of specific allegations in which Plaintiff was expected to explain and/or defend against in advocating for Plaintiff’s enrollment status at SOM of Defendant University.
105. Although Plaintiff responded to Ms. Yates within 28 minutes and asked as to what specifically was the reasoning behind the ASAC disciplinary hearing, neither Ms. Yates nor any other employee of SOM at Defendant University was able to provide Plaintiff with any written statement of the allegations against him during the remaining 3 hours and 32 minutes that Plaintiff had to prepare to advocate for his enrollment status at SOM of Defendant University.
106. Plaintiff initially received only one e-mail from Ms. Yates and no other notifications by phone or in person from anyone else of the ASAC disciplinary hearing.

107. Between 1:23 PM and 2:06 PM on 28 November, 2018, Plaintiff made 9 phone calls (Exhibit 45.) to a variety of faculty members in Charlottesville in an attempt to garner more information about what to expect and as to what exact consequences could arise from the scheduled, upcoming ASAC disciplinary hearing against Plaintiff at 5:00 PM on 28 November, 2018.
108. At 2:12 PM on 28 November, 2018, Plaintiff received an incoming call (Exhibit 45.) from Dr. Reed. While Plaintiff did not record the 2:12 PM phone call from Dr. Reed, Plaintiff reports recollection that Dr. Reed then informed him that he had received a Professionalism Concern Card from as a result of Plaintiff's participation in the aforementioned SIM discussion on microaggressions. Moreover, Plaintiff reports that he had informed Dr. Reed that he was unaware that Plaintiff had received any Professionalism Concern Cards. Finally, Plaintiff reports recollection that Dr. Reed had expressed doubtfulness that Plaintiff had not received any notification of the aforementioned Professionalism Concern Card. Dr. Reed did not by any means send Plaintiff a written copy of the Professionalism Concern Card issued against Plaintiff before his disciplinary hearing scheduled to take place within 2 hours and 48 minutes of the beginning of the incoming call from Dr. Reed.
109. At 5:00 PM on 28 November, 2018, Plaintiff attended the ASAC hearing to discuss his enrollment status. Plaintiff documented the hearing via a photograph (Exhibit 46.) of the attendees and an audio recording (Exhibit 46.B.) of the entire disciplinary hearing. The duration of the ASAC hearing was approximately 28 minutes.
110. During the 28 November, 2018 ASAC disciplinary hearing against Plaintiff, the only document or interaction explicitly and accurately referenced by Dr. Tucker to Plaintiff



was Dr. Tucker's letter on behalf of ASAC to Plaintiff regarding Plaintiff's participation in the SIM discussion on microaggressions. Plaintiff claimed to have never read the aforementioned document including Dr. Tucker's recommendation for counseling at the time of the ASAC disciplinary hearing. Plaintiff requested that Dr. Tucker produce the referenced document, and Dr. Tucker refused to do so until after the conclusion of the disciplinary hearing.

111. During the 28 November, 2018 ASAC disciplinary hearing against Plaintiff, Dr. Tucker erroneously refers to the explicit order by Dr. Densmore in the email referenced in Paragraph 85 of this Complaint as a recommendation to be evaluated by CAPS. Dr. Tucker refuses to acknowledge this error when Plaintiff finds and reads the contents of the email in person to Dr. Tucker during the ASAC disciplinary hearing.
112. From minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff, Ms. Yates tallies twelve voting committee members as "present." Nine of these twelve ASAC committee members present at the 28 November, 2018 ASAC disciplinary hearing against Plaintiff were also present at the 14 November, 2018 ASAC meeting. These nine members were Drs. Jim Tucker, Brian Behm, Donna Chen, Nicholas Intagliata, Nora Kern, Wilson Miller, Barnett Nathan, Catherine Shaffrey, and one fourth year medical student. Each of the remaining three "Disciplinary" Committee Members will be listed numerically in the order that each individual was listed by Ms. Yates with each committee member's name; each committee member's position at SOM on or around 28 November, 2018 to the best of Plaintiff's knowledge; and whatever the Plaintiff feels necessary to include about each committee member's position to provide this Court with what Plaintiff believes to be a sensitive and specific representation of

SOM ASAC's published "Academic Standards and Achievement Committee Operating Procedures." (Exhibit 14.)

113. "Disciplinary" committee member #1 tallied by Ms. Yates as present at the 28 November, 2018 SOM ASAC disciplinary hearing was Roger Abounader, MD, PhD (hereinafter "Dr. Abounader"). Dr. Abounader's publicly available biography (Exhibit 48.) discloses that he holds the title of Professor of Microbiology, Immunology, and Cancer Biology at SOM. The SOM office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Abounader has been an ASAC committee member since on or before the year 2017 and will retain this position until on or after the year 2020. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Abounader was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 28 November, 2018 SOM ASAC disciplinary hearing against Plaintiff. At the time of this pleading, Plaintiff reports having had no recollection of direct contact with Dr. Abounader on or before 5 PM on 28 November, 2018.
114. "Disciplinary" committee member #2 tallied by Ms. Yates as present at the 28 November, 2018 SOM ASAC disciplinary hearing was Robert Bloodgood, PhD (hereinafter "Dr. Bloodgood"). Dr. Bloodgood's publicly available biography (Exhibit 49.) discloses that he holds the title of Professor of Cell Biology at SOM. The SOM office of Student Affairs does not currently list Dr. Bloodgood in its publicly available list of ASAC committee members. Nonetheless, Dr. Bloodgood was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 28 November, 2018 SOM ASAC disciplinary hearing against Plaintiff. At the time of this pleading, Plaintiff

reports having had no recollection of direct contact with Dr. Bloodgood on or before 5 PM on 28 November, 2018.

115. “Disciplinary” Committee member #3 tallied by Ms. Yates as present at the 28 November, 2018 SOM ASAC disciplinary hearing was Sharon Diamond-Myrsten, MD (hereinafter Dr. Diamond-Myrsten). Dr. Diamond-Myrsten’s publicly available biography (Exhibit 50.) discloses that she received Board Certification in Family Medicine by ABMS and retains the title of Assistant Professor of Family Medicine at SOM. The SOM office of Student Affairs discloses in its publicly available list of ASAC committee members that Dr. Diamond-Myrsten has been an ASAC committee member since on or before the year 2018 and will retain this position until on or after the year 2021. In accordance with Section II of operating procedures of the SOM ASAC, Dr. Diamond-Myrsten was designated as a qualified voting member of SOM ASAC by Ms. Yates during the 28 November, 2018 SOM ASAC disciplinary hearing against Plaintiff. At the time of this pleading, Plaintiff reports having had no recollection of direct contact with Dr. Diamond-Myrsten on or before 5 PM on 28 November, 2018.
116. From minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff, Ms. Yates tallies four non-voting committee members as “present.” All four non-voting committee members tallied as present during the 28 November, 2018 disciplinary hearing against Plaintiff have been previously mentioned in this complaint and are listed as follows: John J Densmore, MD, PhD; Megan Bray, MD; Lesley Thomas; and Katherine Yates.
117. From minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff, Ms. Yates tallies three “Guests” as “present.” All three Guests tallied as present

during the 28 November, 2018 disciplinary hearing against Plaintiff have been previously mentioned in this Complaint and are listed as follows: Kieran Bhattacharya (Plaintiff), Lynne Fleming, and Christine Peterson, MD.

118. Paragraph 1 of 5 from minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff states as follows: “The committee convened to discuss concerning behaviors exhibited by Kieran Bhattacharya (Densmore) over the past weeks after members of the Technical Standards Committee determined that the concerns were best addressed by the ASAC. The ASAC convened an emergency meeting on Wednesday November 28. Kieran Bhattacharya was invited to attend the meeting to discuss his enrollment status and did attend the meeting..”
119. Paragraph 2 of 5 from minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff states as follows: “The student was given the opportunity to address concerns about his behavior. He asked questions of members of the Committee and responded to questions asked by the Committee.”
120. Paragraph 3 of 5 from minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff states as follows: “The Committee reviewed the list of technical standards that are acknowledged annually by the students especially the Emotional, Attitudinal and Behavioral Skills.”
121. Paragraph 4 of 5 from minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff states as follows: “Because the student’s behavior demonstrated his inability to meet several of those standards. Dr. Nathan made a motion to suspend Kieran Bhattacharya (Densmore) from the School of Medicine, effective immediately, with the option to petition to return in August of 2019. Dr. Behm seconded

this motion. The committee voted unanimously to accept the motion. Nora Kern did not vote on the matter, as personal business required her to leave before the vote was executed.”

122. Paragraph 5 of 5 from minutes (Exhibit 47.) of the 28 November, 2018 ASAC disciplinary hearing against Plaintiff states as follows: “A letter will be sent to Kieran Bhattacharya’s email, informing him of the decision and explaining the appeals process.”
123. At 5:30 PM on 29 November, 2018, Dr. Tucker sent Plaintiff the following message (Exhibit 51.) by email: “Dear Mr. Bhattacharya, See the attached letter from the Academic Standards and Achievement Committee. Please know that Drs. Densmore, Reed, and Keeley are available for support. Also, in response to your question about ID access, suspension involves a deactivation of your ID per standard university procedure, but you can make an appointment should you need to meet with your college dean.” Attached (Exhibit 51.B.) to this email was notification to Plaintiff of a 1-year suspension from SOM of Defendant University.
124. Paragraph 1 of 4 of Plaintiff’s 1-year suspension letter states as follows: “The Academic Standards and Achievement Committee (“ASAC”) convened on November 28, 2018 to review concerns that your recent behavior in various settings demonstrated a failure to comply with the School of Medicine’s Technical Standards. Members of the Technical Standards Committee determined that the concerns about your recent behavior should be addressed by the Academic Standards and Achievement Committee. The ASAC decided that the nature of the concerns called for an emergency meeting. You were notified of that meeting on November 28, 2018 and provided an opportunity to be heard and to

respond to the concerns about your recent behavior. You attended the meeting, asked and answered questions and presented information.”

125. Paragraph 2 of 4 of Plaintiff’s 1-year suspension letter states as follows: “The Academic Standards and Achievement Committee has determined that your aggressive and inappropriate interactions in multiple situations, including in public settings, during a speaker’s lecture, with your Dean, and during the committee meeting yesterday, constitute a violation of the School of Medicine’s Technical Standards that are found at: <https://med.virginia.edu/student-affairs/policies/technical-standards/>”
126. Paragraph 3 of 4 of Plaintiff’s 1-year suspension letter states as follows: “Those Standards, in relevant and as part of professionalism, state that each student is responsible for: Demonstrating self-awareness and self-analysis of one’s emotional state and reactions; Modulating affect under adverse and stressful conditions and fatigue; Establishing effective working relationships with faculty, other professionals and students in a variety of environments; and Communicating in a non-judgmental way with persons whose beliefs and understandings differ from one’s own.”
127. Paragraph 4 of 4 of Plaintiff’s 1-year suspension letter states as follows: “The committee has voted to suspend you from school, effective immediately. You may apply for readmission to return to class no earlier than August, 2019. A student suspended for academic, professionalism, or administrative reasons or a student who has academic or Technical Standards/professionalism deficiencies at the time of suspension must be reviewed and approved to return by ASAC. The committee would only approve your return if you are able to provide evidence that further violations of the Technical

Standards are unlikely to occur. You may appeal your suspension, in accordance with the SOM's appeal procedures.”

128. In Plaintiff's 1-year suspension letter, Dr. Tucker asserts on behalf of ASAC that “The Academic Standards and Achievement Committee has determined that your aggressive and inappropriate interactions in multiple situations, including in public settings, during a speaker's lecture, with your Dean, and during the committee meeting yesterday.”
129. Prior to Plaintiff's disciplinary hearing at 5:00 PM on 28 November, 2018, Plaintiff was never provided with written documentation from any employee of SOM as to what “aggressive and inappropriate interactions” Plaintiff had committed in “public settings.” Moreover, no member of SOM ASAC made any specific reference to or allegation of Plaintiff's activity in public settings during the disciplinary hearing. The 1-year suspension letter itself provides Plaintiff with no details as to the nature, timing, location, severity, and/or reporting actor(s) of these multiple “public settings” in which Plaintiff is described by Dr. Tucker on behalf of SOM ASAC to have exhibited “multiple aggressive and inappropriate interactions.”
130. Prior to Plaintiff's disciplinary hearing at 5:00 PM on 28 November, 2018, Plaintiff was never provided with written documentation from any employee of SOM as to what “aggressive and inappropriate interactions” Plaintiff had committed in “a speaker's lecture.” If this excerpt from Dr. Tucker's 1-year suspension letter on behalf of SOM ASAC to Plaintiff was referencing the SIM discussion on microaggressions, this Court should take note from available audio of the SIM discussion that Plaintiff was called on to ask questions by Dr. Kern and spoke only during a designated period of questions and answers following Dr. Adams' lecture at the 25 October, 2018 SIM discussion on

microaggressions. Plaintiff did not speak during Dr. Adams' lecture itself, and Plaintiff attempted to detail this by presenting the 5 minute and 20 second audio excerpt to SOM ASAC during Plaintiff's disciplinary hearing but was restrained from doing so by Dr. Tucker. Also, there is no existing documentation available to Plaintiff that any ASAC committee member had listened to the available audio before incorporating this interaction and voting unanimously as a committee to issue a 1-year suspension against Plaintiff from SOM at Defendant University.

131. Prior to Plaintiff's ASAC Disciplinary hearing on 28 November, 2018, Plaintiff was not provided with written documentation from any employee of SOM as to what "aggressive and inappropriate interactions" Plaintiff had committed "with [his] dean."
132. Dr. Tucker asserts in the 1-year suspension letter on behalf on ASAC to Plaintiff that Plaintiff's conduct at the ASAC disciplinary hearing itself qualified as "aggressive and inappropriate," but makes no effort to provide further details on this allegation, and no characterization about Plaintiff's conduct during the disciplinary hearing is explicitly described as aggressive and inappropriate in the minutes documented by Ms. Yates of the 28 November, 2018 disciplinary hearing against Plaintiff.
133. To the best of Plaintiff's recollection, Plaintiff reports that within 72 hours of his receiving a 1-year suspension letter from Dr. Tucker at 5 PM on 29 November, 2018, Plaintiff's UVA health system email account was deleted. Plaintiff was able to archive several emails before this email account was deleted, including but not limited to explicit orders for psychiatric evaluations by Dr. Densmore in Paragraph 85 and by Dr. Canterbury in Paragraph 91 of this Complaint that were erroneously characterized by Dr. Tucker as recommendations during the ASAC disciplinary hearing against Plaintiff.



134. Bullet point #3 of the Academic appeals process listed in the concluding portion of the 1-year suspension letter from Dr. Tucker on behalf of SOM ASAC to Plaintiff declares the following: "The student is permitted to inspect their entire medical school file, including any material upon which the decision of ASAC was based." Emails from Dr. Densmore and Dr. Canterbury obtained by Plaintiff and included as exhibits Paragraphs 85 and 91 of this Complaint were only made available through the process of forwarding and archiving what the Plaintiff believed to be pertinent emails on the morning of 29 November, 2018 and were never made available to Plaintiff in his student file or by any other means from SOM at Defendant University.
135. Bullet point #5 of the Academic appeals process listed in the concluding portion of the 1-year suspension letter from Dr. Tucker to Plaintiff declares the following: "The Appeals Committee is to conduct a hearing as soon as possible (ordinarily within 14 days) and will uphold, modify, or reverse the decision(s) of ASAC."
136. At 11:15 AM on 4 December, 2018, Plaintiff sent an email from a personal email account (Exhibit 52.) to Dr. Densmore to initiate the appeals process. At 8:02 PM on 4 December, 2018, Plaintiff received a response by email (Exhibit 52.B.) from Dr. Densmore declaring that the appeals process had been initiated.
137. On 7 December, 2018, during the course of the scheduled appeals process, Plaintiff received notification by email (Exhibit 53.) from the National Board of Medical Examiners (hereinafter "NBME") that his registration for the United States Medical Licensing Exam Step 1 (hereinafter "USMLE Step 1") was cancelled upon notification by SOM that Plaintiff was not currently enrolled at SOM. Plaintiff was previously scheduled to take the USMLE Step 1 on 1 February, 2019.

138. On 20 December, 2018, approximately 16 days after initiating the appeals process, Plaintiff received his medical student file. It was at this time, more than three weeks after receiving his 1-year suspension, that Plaintiff was able to view the two Professional Concerns Cards placed against him by Attendance Monitor and Dr. Kern, respectively.
139. On 3 January, 2019, Dr. Densmore sent an email with the following message: “Dear Kieran, I received from the University Police Department a copy of a “no trespass warning” issued to you (attached). We will not be able to proceed with an appeal to your suspension at this time. Best regards, John Densmore.”
140. Attached in the aforementioned email from Support Services Captain Melissa Fielding with the following message (Exhibit 54.): “Dear Mr. Bhattacharya: As a follow up to my phone conversation with you on Sunday, December 30, 2018, please find attached to this letter a no trespass warning which has been issued to you by the University of Virginia Police Department at the University of Virginia.”
141. No specific reasoning as to why the no trespass warning (Exhibit 54.) was issued to Plaintiff was provided to Plaintiff in writing.
142. No specific reasoning as to why the no trespass warning (Exhibit 54.) was in issued to Plaintiff and no specific notice that a no trespass warning would be issued to Plaintiff was provided to Plaintiff during the referenced phone call in the message attached to the no trespass warning issued against Plaintiff by then Support Services Captain Melissa Fielding of the University of Virginia Police Department (hereinafter “UPD”) at Defendant University.
143. On 7 July, 2019, Plaintiff emailed Dr. Tucker and Dr. Densmore inquiring about the possibility of readmission to SOM. On 12 July, 2019, Dr. Densmore responded in an

email (Exhibit 55.) with the following message: “Dear Kieran, Thank you for your email. The School of Medicine is aware that a no trespass order was issued by the University Police Department (UPD) on January 2, 2019 prohibiting you from University Grounds for four years. We cannot address your request for readmission while a no trespass order is in effect. Should you have questions about that order, you will need to contact UPD directly. Best regards, John Densmore.”

144. The no trespass warning against Plaintiff from the police department of Defendant University is set to expire on 3 January, 2023.
145. According to SOM’s Policy on Academic and Professional Advancement, “All requirements for graduation, including passing Step 1, Step 2 CK and Step 2 CS of the USMLE, must be completed within six years from the date the student matriculated in the School of Medicine.” Plaintiff would not be able to comply with this requirement if he were to graduate from SOM after 3 August, 2022.

**COUNT I – FIRST AMENDMENT VIOLATION (42 U.S.C. § 1983)**

For count I of his Complaint, for First Amendment Violation of Freedom of Speech and Expression against Defendant University, Plaintiff Kieran Bhattacharya, states as follows:

146. Plaintiff herein incorporates by reference the allegations contained in Paragraphs 1 through 145 of his Complaint.
147. The First Amendment prohibits State officials at public universities from adopting regulations that outlaw certain student conduct when the regulation “is so broad as to chill the exercise of free speech and expression.” *Dambrot v. Cent. Michigan University*, 55 F.3d 1177, 1182 (6<sup>th</sup> Cir. 1995)

148. The government may not prohibit speech “based solely on the emotive impact that its offensive content may have on a listener.” *Saxe v. State College Area School dist.*, 240 F.3d 200, 209 (3d Cir. 2001) (Alito, J).
149. Moreover, “regulations that prohibit speech on the basis of listener reaction alone are unconstitutional both in public high school and university settings.” *Bair v. Shippensburg Univ.*, 280 F. Supp. 2d 357, 369 (M.D. Pa. 2003).
150. A regulation is unconstitutionally overbroad if “a substantial number of instances exist in which the [regulation] cannot be applied constitutionally.” *Speet v. Schuette*, 726 F .3d 867, 872 (6<sup>th</sup> Cir. 2013). This Court must find a regulation as facially unconstitutional because “the threat of enforcement of an overbroad [regulation] may deter or ‘chill’ constitutionally protected speech,” as “[m]any persons, rather than undertake the considerable burden (and sometimes risk) of vindicating their rights through case-by-base litigation, will chose simply to abstain from protected speech, harming not only themselves but society as a whole, which is deprived of an uninhibited market of ideas.” *Virginia v. Hicks*, 539 U.S. 113, 119 (2003).
151. Dr. Densmore, who was acting at the time in the capacity of a public employee at SOM of Defendant University, issued a mandatory psychiatric evaluation by Defendant University’s Counseling and Psychological Services via email at 5:30 PM on 26 November, 2018 as a necessary condition for Plaintiff’s returning to classes at SOM. This mandatory psychiatric evaluation constitutes a violation of Plaintiff’s First Amendment protections of freedom of speech and expression. Furthermore, Dr. Densmore’s issuance of a mandatory psychiatric evaluation violates Plaintiff’s private conscience.

152. To Plaintiff's knowledge, no established protocol or policy of SOM at Defendant University allows a faculty member to, without explicit reason, order that a medical student receive an indefinite amount of psychiatric evaluations for an indefinite period of time by an unspecified individual or individuals to maintain enrollment at SOM at Defendant University, a public institution. Moreover, no established protocol or policy by SOM of Defendant University was communicated to Plaintiff with the email by Dr. Densmore referenced in Paragraph 85 of this Complaint.
153. Beyond the lack of clear legal and institutional bases in Dr. Densmore's mandated psychiatric evaluation by email to Plaintiff, it isn't explicitly clear to Plaintiff as to how Dr. Densmore would be able to verify that Plaintiff had been evaluated by CAPS at the Elson Student Health of Defendant University. The Department of Student Health at Defendant University's statement (Exhibit 56.) of student confidentiality states as follows: "Your medical records will be kept confidential and access to information about you will be limited to those legitimately involved in your care. Your medical records will be released only in cases of medical emergencies, in response to court-ordered subpoenas or to persons you specify with your written consent." Moreover, Plaintiff's receiving treatment from CAPS would in itself have required written consent, and even if Plaintiff did decide on his own volition to request treatment from CAPS, there would be ample reasons for Plaintiff to do so while maintaining strict confidentiality.
154. Thus, even if Dr. Densmore had the legal and institutional authority to order psychiatric evaluations of medical students at SOM without any explicitly written reason, there would and should be no practical way for Dr. Densmore to systematically confirm that such orders were followed by Plaintiff, nor are there any publicly established policies by

Defendant University to the best of Plaintiff's knowledge that specify exactly what Plaintiff must have said or done while being evaluated by CAPS. Plaintiff, for example, could have decided on his volition to consent to treatment at CAPS and chose to remain silent in the presence of a psychiatrist or counselor and promptly left immediately after beginning an interaction with a CAPS employee.

155. Dr. Densmore made no attempt to challenge Plaintiff's responses by email or by phone on 27 November, 2018 to clarify what legal and institutional bases Dr. Densmore felt that he had at the time to order a mandatory psychiatric evaluation of Plaintiff as a necessary prerequisite to return to classes at SOM of Defendant University.
156. Dr. Canterbury's follow-up email on 27 November, 2018, detailed in Paragraph 91, reaffirms the mandatory psychiatric evaluation from Dr. Densmore from the previous day. Dr. Canterbury's order lacks the same degree of legal bases, institutional authority, and practical application for the same reasons listed in Paragraphs 146 to 155.

**COUNT II – FIFTH AMMENDMENT VIOLATION (U.S.C. 42 § 1983)**

For Count II of his Complaint, for Fifth Amendment Violation of Procedural Due Process against Defendant University, Plaintiff Kieran Bhattacharya, states as follows:

157. Plaintiff hereby re-alleges and repeats paragraphs 1 through 156, and incorporates them herein as fully set forth.
158. The concept of procedural due process "imposes constraints on governmental decisions which deprive individuals of 'liberty' or 'property' interests within the meaning of the Due Process Clause of the Fifth or Fourteenth Amendment." *Matthews v. Eldridge*, 424 U.S. 319, 332 (1976)

159. Moreover, “[D]ue process requires notice and some opportunity for hearing before a student at a tax-supported college is expelled for misconduct.” *Dixon v. Ala. State Bd. Of Educ.*, 294 F.2d 150, 158 (5<sup>th</sup> Cir. 1961).
160. Plaintiff acknowledges that “[a] university is not a court of law, and it is neither a practical or desirable one.” (quoting *Flain v. Med. Coll. Of Ohio*, 418 F.3d 629, 635 n.1 (6<sup>th</sup> Cir. 2005))
161. Applying *Matthews*: “Generally, the amount of process due in university disciplinary proceedings is based on a sliding scale that considers three factors: (a) the student’s interests that will be affected; (b) the risk of an erroneous deprivation of such interests through the procedures used and the probable value, if any, of additional or substitute procedural safeguards; and (c) the university’s interests, including the burden that additional procedures would entail.” (citing *Matthews*, 424 U.S. at 335). These are also known as the *Matthews* factors.
162. Plaintiff reports that a 1-year suspension for “unprofessionalism” would be catastrophic towards his interests as a prospective medical resident, assuming that SOM had accepted his request for reenrollment or will in the future provide Plaintiff with an opportunity for reenrollment, which Dr. Densmore reports on behalf of SOM that SOM is unable to do so at the time of this Complaint as a result of the 4-year No Trespass Order issued against Plaintiff on 2 January, 2019.
163. Plaintiff received no written explanation as to why exactly his enrollment status was being addresses and only received notice of his disciplinary hearing by email 4 hours prior to the disciplinary hearing. This is in direct discordance with Section III.D. of ASAC operating procedures that “the student should be notified by the Committee in

writing as to what the major concerns of the Committee are likely to be during the coming meeting,”

164. It is inconceivable, particularly with notice by e-mail 4 hours prior to the disciplinary hearing, that Plaintiff would know exactly how to properly defend his enrollment status in SOM at Defendant University without any written descriptions as to what major concerns the Committee are likely to be during the coming meeting.
165. Even after calling nearly 10 SOM faculty members merely hours before he was required to defend his enrollment status, Plaintiff only received verbal notification of a Professionalism Concern Card that had been issued more than one month prior, but he had received no explicit notification of the actual Professionalism Concern Card from Dr. Kern. Beyond the fact that neither Dr. Kern, Dr. Peterson, Dr. Tucker, nor any committee member of SOM ASAC made any effort to explicitly inform Plaintiff in person, by email, or by phone of the Professionalism Concern Card when having ample opportunity to do so, there exists no documentation in Plaintiff’s student file that the Professionalism Concern Card was addressed specifically by Dr. Densmore with Plaintiff. This interaction between Plaintiff and Dr. Densmore should have been carried and documented in a timely manner after 25 October, 2018 for the Professionalism Concern Card to have been made in compliance with SOM’s Policy on Academic and Professional Advancement. Finally, Dr. Reed made no effort to provide Plaintiff with a written copy of the Professionalism Concern Card hours before the disciplinary hearing was scheduled to commence, and Dr. Tucker made no effort to provide Plaintiff with a written copy of the Professionalism Concern Card during the disciplinary hearing itself. Plaintiff did not obtain a physical copy of the Professionalism Concern Card until receiving a copy of his



Student File on 20 December, 2018, 56 days after the Professionalism Concern Card was issued by Dr. Kern and 22 days after Plaintiff received a 1-year suspension for unprofessionalism.

166. Despite multiple attempts to clarify as to what specific allegation he was defending against with Ms. Yates by email, with Dr. Reed by phone, and at least three ASAC committee members during the ASAC Disciplinary hearing on 28 November, 2018, Plaintiff received no notification of any other specific incidents with the exception of a vague and unwritten references to Plaintiff's conduct during his participation in the SIM discussion on microaggressions on 25 October, 2018.
167. Plaintiff brought a copy of the audio recording of the SIM discussion and includes the audio in this Complaint. Dr. Tucker, chairman of ASAC and author of Plaintiff's 1-year suspension letter, not only declined to hear this audio recording during the ASAC disciplinary hearing, but he also did not explicitly demonstrate any effort to listen to the audio recording during the prior 14 November, 2018 ASAC meeting, where Dr. Tucker made the decision to recommend that Plaintiff seek psychological counseling without explicit approval or vote of such language by the other 11 voting committee members according to minutes documented by Ms. Yates during the 14 November, 2018 ASAC meeting and obtained by Plaintiff in his medical student file.
168. Finally, Dr. Tucker erroneously characterized Dr. Densmore's mandatory psychiatric evaluation as a recommendation and refused to correct himself after correction by Plaintiff of this mischaracterization during the course of the 28 November, 2018 ASAC Disciplinary hearing.

**PRAYER FOR RELIEF**

WHEREFORE, Plaintiff Kieran Bhattacharya prays that the Court:

- a) order Defendant University to dissolve its existing No Trespass Order from UPD, therefore permitting Plaintiff to coordinate opportunity for re-enrollment at SOM
- b) order Defendant University to remove all references from Plaintiff's 1-year suspension from his medical student file
- c) order Defendant University to remove all references to Plaintiff's two Professionalism Concern Cards from his medical student file
- d) order Defendant University to allow Plaintiff the opportunity for reenrollment at SOM on or around 4 November, 2019 to allow Plaintiff to complete requirements of SOM's Doctor of Medicine program within 6 years of his matriculation date
- e) order Defendant University to allow for Plaintiff's registration of the USMLE Step 1 on or before 10 February, 2020 by immediately notifying the NBME of Plaintiff's enrollment status at SOM
- f) order Defendant University compensate Plaintiff for lost potential future income, harm to professional reputation, and any and all out-of-pocket incidental expenses in an amount not less than one hundred and forty thousand and 00/100 dollars (\$140,000)
- g) Order Defendant University to pay court costs; and
- h) Enter its Order for such other and further relief as this Court deems just and proper under the circumstances.

**JURY TRIAL DEMAND**

Plaintiff demands trial by jury on all issues so triable.

Respectfully Submitted,  
Kieran Bhattacharya



/s/ Kieran Bhattacharya  
Filing as Pro Se Litigant  
70 Hale Pili Way  
Haiku, HI, 96708  
Cell: (808) 344-9928  
E-mail: kieran0696@gmail.com

# CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

### I. (a) PLAINTIFFS

Bhattacharya, Kieran, R.

(b) County of Residence of First Listed Plaintiff Mauï County  
(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)  
Kieran Ravi Bhattacharya - filing as pro se litigant  
70 Hale Pili Way, Haiku, HI, 96708  
808-344-9928

### DEFENDANTS

Rector and Visitors of the University of Virginia

County of Residence of First Listed Defendant City of Charlottesville  
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

### II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- 1 U.S. Government Plaintiff
- 3 Federal Question (U.S. Government Not a Party)
- 2 U.S. Government Defendant
- 4 Diversity (Indicate Citizenship of Parties in Item III)

### III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

	PTF	DEF		PTF	DEF
Citizen of This State	<input type="checkbox"/> 1	<input type="checkbox"/> 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Citizen of Another State	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6

### IV. NATURE OF SUIT (Place an "X" in One Box Only)

Click here for: Nature of Suit Code Descriptions.

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES	
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	<b>PERSONAL INJURY</b> <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice	<b>PERSONAL INJURY</b> <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability <b>PERSONAL PROPERTY</b> <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other <b>LABOR</b> <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act <b>IMMIGRATION</b> <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 <b>PROPERTY RIGHTS</b> <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark <b>SOCIAL SECURITY</b> <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) <b>FEDERAL TAX SUITS</b> <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
REAL PROPERTY	CIVIL RIGHTS	PRISONER PETITIONS			
<input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	<input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input checked="" type="checkbox"/> 448 Education	<b>Habeas Corpus:</b> <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <b>Other:</b> <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement			

### V. ORIGIN (Place an "X" in One Box Only)

- 1 Original Proceeding
- 2 Removed from State Court
- 3 Remanded from Appellate Court
- 4 Reinstated or Reopened
- 5 Transferred from Another District (specify)
- 6 Multidistrict Litigation - Transfer
- 8 Multidistrict Litigation - Direct File

### VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

28 U.S.C. § 1332, 42 U.S.C. § 1983

Brief description of cause:

Civil action for deprivation of rights; Violations of Free Speech/Expression and Procedural Due Process

### VII. REQUESTED IN COMPLAINT:

CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$ 140,000.00

CHECK YES only if demanded in complaint:  
 JURY DEMAND:  Yes  No

### VIII. RELATED CASE(S) IF ANY

(See instructions):

JUDGE

DOCKET NUMBER

DATE 09/16/2019 SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

Social Issues in Medicine Agency Evaluation of Student

Fall 16 X Spring 17

Name of Student Kieran Bhattacharya Name of Agency and Program Albemarle County DSS, Foster Care Unit Supervisor Name & Tel# Beckie Aderholz

- 1. Briefly describe your student's duties. Casework, Direct Client Contact, Shadowing, Home Visits, Outreach, Health Fairs, Administrative/Clerical, Assisting clients with material needs, Teaching/Educational activities, Mentoring/Tutoring, Other

2. Has the student attended all scheduled sessions? Yes X No

- 3. Has the student conformed to expectations of professionalism with respect to the following: a. Dress & Appearance, b. Attendance, c. Positive attitude, d. Maintenance of confidentiality relating to client and agency issues

Please explain any negative responses:

None to report.

4. To what extent has the student been responsive to criticism and suggestions? (Bold & Underline a number) (Very little) 1 2 3 4 5 (Very much)

5. To what extent has the student demonstrated engagement in his/her assignment by directing questions appropriately to the supervisor or other agency staff? (Bold & Underline a number) (Very little) 1 2 3 4 5 (Very much)

6. To what extent has the student demonstrated respect for clients? (Bold & Underline a number) (Very little) 1 2 3 4 5 (Very much)

7. To what extent has the student demonstrated an understanding for the social, psychological, economic and health issues that impact your client population? (Bold & Underline a number) (Very little) 1 2 3 4 5 (Very much)

8. To what extent has the student demonstrated cultural sensitivity in his/her interaction with your client population? (Bold & Underline a number) (Very little) 1 2 3 4 5 (Very much) OR N/A (Not Applicable) If not applicable, please explain.

9. How strong is the student's understanding of the services provided by your agency and the challenges you face in delivering them? (Bold & Underline a number) (Not Very Strong) 1 2 3 4 5 (Very Strong)

10. Did the student make a contribution to the work of the agency? (Bold & Underline a number) (Very little) 1 2 3 4 5 (Very much) Please explain:

11. In a few sentences, please describe below your student's strengths and explain any concerns you encountered while working with him/her.

Please note any problems or satisfactions you encountered as a placement site for the University of Virginia Medical School Social Issues in Medicine course. Include any suggestions for improving the program. Please continue your comments on the back or on another sheet, if necessary.

Return this form via Email: da7r@virginia.edu or Fax: 434-982-6379

Thank you for participating as a supervisor in the Social Issues in Medicine course.

**Student Performance Evaluation**

**Peer Actionable Feedback SMD20 - TBL Team (FOM 9/12/16)**

[Close](#) | [Print version](#)



Student Level Med1

**Course Information**

Date	Course	Location	Weeks	Credits
08/15/2016 - 09/24/2016	90-6712: Medical Education Foundations Of Medicine	UVA	6	0

**Evaluation Period:** 08/15/2016 - 09/24/2016

**Student Activity:** Student added student peer

**Evaluator:** [redacted]

**Student:** Bhattacharya, Kieran **Email:** [redacted]

lick [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Kieran always comes prepared and has opinions about questions. He is good at defending his choice and making his thought process clear.

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

Not applicable. Kieran was a little quiet at the beginning but when he spoke up we benefited from his contributions.

3.\* What have you learned from this team member that you can take with you to your next experience?

From Kieran, I have learned that it is ok to disagree.

4.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

**Frequently exceeds expectations**

- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

5. Feedback given by (optional):

Last modified (submitted) at 09/15/2016 08:54:56 PM by [redacted]

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2.

UVA  
Health  
Student

**Student Performance Evaluation**

**Peer Actionable Feedback SMD20 - TBL Team (FOM 9/12/16)**

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Student Level Med1

**Course Information**

Date	Course	Location	Weeks	Credits
08/15/2016 - 09/24/2016	90-6712: Medical Education Foundations Of Medicine	UVA	6	0

**Evaluation Period:** 08/15/2016 - 09/24/2016

**Student Activity:** Student added student peer

**Evaluator:** [redacted]

**Student:** Bhattacharya, Kieran **Email:** [redacted]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Kieran is always well prepared, but still accepts other people's viewpoints during discussions.

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

He could do better job speaking up when he believes he has the right answer.

3.\* What have you learned from this team member that you can take with you to your next experience?

He has taught me how to listen well to other's opinions.

4.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

- Frequently exceeds expectations
- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

5. Feedback given by (optional):

[redacted]

Last modified (submitted) at 09/15/2016 10:55:59 AM by [redacted]

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2.

VA  
Team  
Expert

**Student Performance Evaluation**

**Peer Actionable Feedback SMD20 - TBL Team (FOM 9/12/16)**

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Student Level Med1

**Course Information**

Date	Course	Location	Weeks	Credits
08/15/2016 - 09/24/2016	90-6712: Medical Education Foundations Of Medicine	UVA	6	0

**Evaluation Period:** 08/15/2016 - 09/24/2016

**Student Activity:** Student added student peer

**Evaluator:** [redacted]

**Student:** Bhattacharya, Kieran **Email:** [redacted]

[Click here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Relaxed attitude, willingness to differ in opinion

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

Could wait to be called on by GRAT/GAE facilitator before expressing opinion/answering question, speak louder

3.\* What have you learned from this team member that you can take with you to your next experience?

Willingness to compromise views to incorporate others' ideas

4.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

- Frequently exceeds expectations
- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

5. Feedback given by (optional):

[redacted]

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2.

UVA  
Health  
Student

**Student Performance Evaluation**

**Peer Actionable Feedback SMD20 - TBL Team (FOM 9/12/16)**

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Student Level Med1

**Course Information**

Date	Course	Location	Weeks	Credits
08/15/2016 - 09/24/2016	90-6712: Medical Education Foundations Of Medicine	UVA	6	0

**Evaluation Period:** 08/15/2016 - 09/24/2016

**Student Activity:** Student added student peer

**Evaluator:** [redacted]

**Student:** Bhattacharya, Kieran **Email:** [redacted]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

You are great at working through your through processes to explain your reasoning behind answers

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

I think it would be helpful if you were more open to considering answers that others agree with.

3.\* What have you learned from this team member that you can take with you to your next experience?

I have learned to look for less obvious reasoning that is perfectly logical

4.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

**X Frequently exceeds expectations**

- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

5. Feedback given by (optional):

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2.

UVA  
Credits  
Student

### Student Performance Evaluation Peer Actionable Feedback SMD20 - TBL Team (MIS 11/30/16)

[Close](#) | [Print version](#)



Student Level Med1

#### Course Information

Date	Course	Location	Weeks	Credits
10/31/2016 - 12/17/2016	90-901: Medical Education Microbes & The Immune System	UVA	7	0

**Evaluation Period:** 10/31/2016 - 12/17/2016

**Student Activity:** Student added student peer

**Evaluator:** [redacted]

**Student:** Bhattacharya, Kieran **Email:** [redacted]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Kieran is always well prepared and helps our team come to the right conclusion on the GRAT.

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

It doesn't really affect anyone but himself, but he is occasionally late to TBLs by a couple of minutes or so.

3.\* What have you learned from this team member that you can take with you to your next experience?

How to be a good group member.

4.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

**X Frequently exceeds expectations**

- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

5. Feedback given by (optional):

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3.

UVA  
Health  
Student

**Student Performance Evaluation**

**SMD20 Clinical Performance Development Phase 1, Semester 1A Student Evaluation**

[Close](#) | [Print version](#)

Student Level Med1



**Course Information**

Date	Course	Location	Weeks	Credits
08/01/2016 - 12/18/2016	90-7718: Medical Education Clinical Performance Development 1A	UVA	18	0

**Evaluation Period:** 08/01/2016 - 12/18/2016

**Evaluator:** Wolf, Andrew

**Student:** Bhattacharya, Kieran **Email:** [REDACTED]

This evaluation is to be performed on the CPD 1A small group student. Please give thoughtful consideration to each answer by selecting the most appropriate response using the Likert scale following each question.

1.\* I attest that I have no conflict of interest in evaluating this student (e.g., provider-patient relationship, familial relationship, personal friendship). Check YES if you have no conflict, check NO if you have conflict."

Yes  No

If you cannot attest to the question above, the evaluation will not be available to complete. If you cannot continue, please:

- Exit from the evaluation to the list of evaluations you have to complete
- Select "cannot evaluate" for this evaluation
- Explain in the text box your conflict of interest

2.\* The student participates in and contributes to small group discussion

Strongly Agree  
 Agree  
 Disagree  
 Strongly Disagree

3.\* The student demonstrates appropriate interpersonal communication skills

Strongly Agree  
 Agree  
 Disagree  
 Strongly Disagree

4.\* The student is willing to help others in the group

Strongly Agree  
 Agree  
 Disagree  
 Strongly Disagree

5.\* The student exhibits humanism, compassion, and empathy during small group

Strongly Agree



14.\* The student completes assignments on time.

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

15.\* The student demonstrates engagement in the SIM community service experience. (Monday & Tuesday groups only; WEDNESDAY & THURSDAY GROUPS ANSWER "N/A")

- Strongly Agree
- Agree
- Neutral
- Disagree
- Strongly Disagree
- N/A

The following questions assess the level of students' awareness of the non-medical societal factors that impact the delivery of healthcare.

16.\* The student incorporates knowledge of the patient's socioeconomic circumstances in his/her history of the patient, the diagnosis and/or treatment plan

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

17.\* The student incorporates knowledge of the patient's cultural circumstances in his/her history of the patient, the diagnosis and/or treatment plan

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

18.\* The student demonstrates awareness of the political and economic forces that impact the delivery of health care

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

19.\* The student demonstrates awareness of the socio-cultural forces that impact the delivery of health care

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

The following questions pertain to student participation during skills learning

20.\* The student can determine the BMI using the patient's height and weight

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree

21.\* The student demonstrates knowledge and awareness of end of life care issues

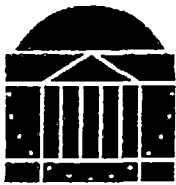
- Strongly Agree

3,

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[REDACTED]



# University of Virginia Official Withdrawal Form

### Instructions

1. Complete student portions of form
2. Present form to dean of school for approval
3. Present form to Dean of Students

I.D. Number: [Redacted]

Name: Bhattacharya Kisan Ravi  
Last First and Middle

Permanent Address: [Redacted]

School of Enrollment: Medicine

Reason(s) for withdrawal: Medical  Other: Personal

By affixing my signature to this document, I certify the following:

1. I am over 18 years of age or have consent of my parent or guardian to withdraw from the University.
2. I understand that I remain liable for any obligation to the University, and that withdrawal does not cancel any such liability.
3. If I wish to apply for readmission, I must do so in writing to my academic dean's office at least <sup>60</sup>30 days in advance of the start of the semester. (This deadline may be waived by the dean of the school.)
4. I am [Redacted] am not an international student studying in the United States on a visa. If I am, I have notified the International Students Office in advance that I am withdrawing.
5. I do [Redacted] do not have a federal loan (Ford Federal Direct, Perkins, Health Professions, Nursing, institutional, etc.) <sup>and I do</sup> understand my responsibility for repayment and an exit interview.
6. I do [Redacted] do not reside in University housing and/or have a meal plan. If I do, I understand my responsibility for an exit interview with the Housing Division and/or Dining Services.
7. I am [Redacted] am not requesting this withdrawal because I have been arrested for, charged with, convicted of, or must serve a criminal sentence for any crime, excluding only minor traffic violations which do not involve bodily injury to others. (If yes, attach an explanation providing a complete and truthful account of the circumstances.)

Signature: [Signature]  
 Date: 02/07/17

Dean of School Effective Withdrawal Date: 2-7-17  
 Authorized Signature: [Signature]

Dean of Students Date: 2/21/2017  
 Authorized Signature: [Signature]

Registrar Withdrawal Type: \_\_\_\_\_

In accordance with University regulations, notification of your withdrawal will be made to the following offices as appropriate: Athletics, Communication Services, Dining Services, Honor Committee, Housing Division, International Students, ITC, Judiciary Committee, Library, Student Financial Services, and the University Registrar.



# UNIVERSITY of VIRGINIA

SCHOOL OF MEDICINE  
Office for Student Affairs

4.

Academic Year: 2016-7

I understand the University of Virginia School of Medicine policy that **students must complete the requirements for their M.D. degree within 6 years of their original matriculation date.**

Students who are on a Leave of Absence must request return to the Associate Dean for Student Affairs and the School of Medicine Registrar at least **60 days** prior to the registration dates for the semester during which they intend to register. Acceptance for readmission will depend on availability due to limitations in class size. The student must meet any additional conditions that are deemed warranted by the Associate Dean for Student Affairs and Admission upon return to registration. A student granted a LOA for medical reasons will require subsequent medical clearance from the Student Health Center as a condition for returning. All students returning from LOA must re-attest to their ability to meet the Technical Standards, with or without reasonable accommodation.

A student who has failed to comply with any conditions of his or her LOA, or who does not return to the School of Medicine within the length of time granted, will be deemed to have withdrawn voluntarily, and any request for readmission, as long as the six year time limit still can be met, must be determined by a vote of ASAC.

Students who have received financial aid must have an exit interview with a financial aid counselor. Immediate repayment of borrowed funds or scholarships may be required.

My signature affirms that I have read and understand the above policies:

[Signature] 02/07/17  
Signature date

Name: KIERAN RAVI BHATTACHARYA  
(Please print clearly)

Are you requesting this LOA because you have been arrested or charged with or convicted of or must serve a criminal sentence for any crime, excluding only minor traffic violations which do not involve bodily injury to others? No  Yes  If yes, attach your explanation to this application providing a complete and truthful account of the circumstances.

Reason for leave of absence from the University of Virginia School of Medicine and intended return date:

Personal

[Signature] 2-5-17  
Signature of Student Affairs Officer date

PO BOX 800739 • CHARLOTTESVILLE, VA 22908-0739 • PHONE (434) 924-5579 • FAX (434) 982-4073  
<http://www.med-ed.virginia.edu/>

5.

UVA  
Health  
Student

### Student Performance Evaluation

#### Provide End of Semester Peer Feedback to Your TBL Teammates

[Close](#) | [Print version](#)



Student Level Med1

#### Course Information

Date	Course	Location	Weeks	Credits
03/26/2018 - 05/26/2018	90-903: Medical Education Mind, Brain, & Behavior	UVA	9	9

Evaluation Period: 03/26/2018 - 05/26/2018

Student Activity: Student added student peer

Evaluator: [redacted]

Student: Bhattacharya, Kieran Email: [redacted]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Excellent job overall. Is always prepared.

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

Nothing really.

3.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

Frequently exceeds expectations

- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

4.\* What have you learned from this team member that you can take with you to your next experience?

Easier ways to do/remember things

5. Feedback given by (optional):

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5.

UVA  
Health  
Student

**Student Performance Evaluation**

**Provide End of Semester Peer Feedback to Your TBL Teammates**

[Close](#) | [Print version](#)



Student Level Med1

**Course Information**

Date	Course	Location	Weeks	Credits
03/26/2018 - 05/26/2018	90-903: Medical Education Mind, Brain, & Behavior	UVA	9	9

**Evaluation Period:** 03/26/2018 - 05/26/2018

**Student Activity:** Student added student peer

**Evaluator:** [redacted]

**Student:** Bhattacharya, Kieran **Email:** [redacted]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Predictive skills for IRAT questions are 10/10

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

Very obvious god complex when you're assigning team members to questions. Maybe stay away from surgery/emergency med

3.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

- Frequently exceeds expectations
- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

4.\* What have you learned from this team member that you can take with you to your next experience?

Test every hypothesis with scientific vigor

5. Feedback given by (optional):

[redacted]

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UVA

Health

Student

5.

## Student Performance Evaluation

### Provide End of Semester Peer Feedback to Your TBL Teammates

[Close](#) | [Print version](#)



Student Level Med1

#### Course Information

Date	Course	Location	Weeks	Credits
03/26/2018 - 05/26/2018	90-903: Medical Education Mind, Brain, & Behavior	UVA	9	9

**Evaluation Period:** 03/26/2018 - 05/26/2018

**Student Activity:** Student added student peer

**Evaluator:** [REDACTED]

**Student:** Bhattacharya, Kieran **Email:** [REDACTED]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

-Confidence in answers  
 -Gives clear explanations  
 -Supportive team behavior  
 -Volunteers to represent team during the GAE

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

-Elicit multiple view points from team members

3.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

- Frequently exceeds expectations
- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

4.\* What have you learned from this team member that you can take with you to your next experience?

Kieran's confidence and willingness to volunteer to represent the team during the GAE

5. Feedback given by (optional):

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5

UVA  
Health  
Student

### Student Performance Evaluation

#### Provide End of Semester Peer Feedback to Your TBL Teammates

[Close](#) | [Print version](#)



Student Level Med1

#### Course Information

Date	Course	Location	Weeks	Credits
03/26/2018 - 05/26/2018	90-903: Medical Education Mind, Brain, & Behavior	UVA	9	9

Evaluation Period: 03/26/2018 - 05/26/2018

Student Activity: Student added student peer

Evaluator: [REDACTED]

Student: Bhattacharya, Kieran Email: [REDACTED]

Click [here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

Always comes prepared and is very knowledgeable.

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

N/A

3.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

Frequently exceeds expectations

- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

4.\* What have you learned from this team member that you can take with you to your next experience?

Always come as prepared as possible.

5. Feedback given by (optional):

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5.

UVA  
Meets  
Student

### Student Performance Evaluation

#### Provide End of Semester Peer Feedback to Your TBL Teammates

[Close](#) | [Print version](#)



Student Level: Med1

#### Course Information

Date	Course	Location	Weeks	Credits
03/26/2018 - 05/26/2018	90-903: Medical Education Mind, Brain, & Behavior	UVA	9	9

Evaluation Period: 03/26/2018 - 05/26/2018

Student Activity: Student added student peer

Evaluator: [redacted]

Student: Bhattacharya, Kieran Email: [redacted]

[Click here](#) to see the Exceptions of TBL Members - Rubric for Peer Feedback and Evaluation.

1.\* Comment on actions or behaviors that this team member has done well and should continue doing.

You do a great job of coming to TBL prepared and helping our group answer questions correctly.

2.\* Comment on actions or behaviors that this team member could improve upon, stop doing, or start doing.

Be confident in your answers!

3.\* How do you rate this student's performance to date? Refer to the "Expectations of TBL Members - Rubric for Peer Feedback and Evaluation" to guide your selection.

- Frequently exceeds expectations
- Meets and sometimes exceeds expectations
- Meets expectations
- Partially meets expectations
- Does not meet expectations

4.\* What have you learned from this team member that you can take with you to your next experience?

I have learned the importance of coming prepared to TBLs.

5. Feedback given by (optional):

[redacted]

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6.

UVA  
Health  
Student

**Student Performance Evaluation**  
**CPD Phase 1B Student Evaluation**

[Close](#) | [Print version](#)

Student Level Med1



**Course Information**

Date	Course	Location	Weeks	Credits
01/01/2018 - 05/25/2018	90-7719: Medical Education Clinical Performance Development 1B	UVA	21	0

**Evaluation Period:** 01/01/2018 - 05/25/2018

**Evaluator:** Moak, James

**Student:** Bhattacharya, Kieran **Email:** [REDACTED]

This evaluation is to be performed on the CPD Phase 1 small group student. Please give thoughtful consideration to each answer by selecting the most appropriate response using the scale following each question: Strongly Agree, Agree, No Strong Feelings Either Way, Disagree, Strongly Disagree

1.\* I attest that I have no conflict of interest in evaluating this student (e.g., provider-patient relationship, familial relationship, personal friendship). Check YES if you have no conflict, check NO if you have conflict."

Yes  No

2.\* The student participates in and contributes to small group discussion.

- Strongly Agree
- Agree
- No strong feelings either way
- Disagree
- Strongly Disagree

3.\* The student demonstrates appropriate interpersonal communication skills.

- Strongly Agree
- Agree
- No strong feelings either way
- Disagree
- Strongly Disagree

4.\* The student is willing to help others in the group.

- Strongly Agree
- Agree
- No strong feelings either way
- Disagree
- Strongly Disagree

5.\* The student exhibits humanism, compassion, and empathy during small group.

- Strongly Agree
- Agree
- No strong feelings either way
- Disagree
- Strongly Disagree



6.

**X Agree**

- No strong feelings either way
- Disagree
- Strongly Disagree

14.\* The student submits patient histories for review in a timely manner.

 Strongly Agree**X Agree**

- No strong feelings either way
- Disagree
- Strongly Disagree

Question 15 pertains only to Wednesday and Thursday groups for the student's Spring Social Issues in Medicine assessment. If your group meets on Monday or Tuesday, please answer N/A.

15.\* The student demonstrates engagement in the SIM community service experience.

 Strongly Agree Agree Disagree Strongly Disagree**X N/A**

The following questions assess the level of students' awareness of the non-medical societal factors that impact the delivery of healthcare.

16.\* The student incorporates knowledge of the patient's cultural and socioeconomic circumstances in his/her history of the patient, diagnosis, and/or treatment plan.

 Strongly Agree**X Agree** No strong feelings either way Disagree Strongly Disagree

17.\* The student demonstrates awareness of the political and economic forces that impact the delivery of health care.

 Strongly Agree**X Agree** No strong feelings either way Disagree Strongly Disagree

The following questions pertain to student participation during skills learning.

18.\* The student can perform the upper extremity physical examination.

 Strongly Agree**X Agree** No strong feelings either way Disagree Strongly Disagree

19.\* The student can perform the lower extremity physical examination.

 Strongly Agree**X Agree** No strong feelings either way Disagree Strongly Disagree

20.\* The student can perform the abdominal physical examination.

6

important insights on social, cultural, and political factors related to our cases. He has a sincere bedside manner that his patients will find reassuring.

27.\* Please describe areas this student should work on:

Kieran should continue to practice his physical exam skills. In preparation for the fall OSCE he will want to have his sequence for the various exam maneuvers well-rehearsed (e.g., the neurological exam). Now that he has mastered the basics of a medical interview, he should focus on higher order skills such as taking a sexual history, delivering bad news, and responding to an angry patient. Kieran has a good sense of humor and a ready smile. I have encouraged him to share those facets of his personality more with his patients (when appropriate) to help encourage even better exchange of information.

Last modified (submitted) at 05/25/2018 12:26:29 PM by Moak, James.

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**POLICY ON ACADEMIC AND PROFESSIONAL ADVANCEMENT**

**Objective:** The purpose of this policy is to promote student academic achievement, maintain academic and professional standards (knowledge, skills, attitudes and behaviors) and achieve fairness and consistency in decisions regarding students with academic or professional deficiencies. It is the policy of the School of Medicine to give every qualified and committed student the opportunity to graduate; however, the School reserves the right, in its sole and absolute discretion, to make judgments about who has or has not demonstrated the necessary qualifications to earn the M.D. degree and to practice medicine competently.

**Outline of Policy:** All academic deficiencies, patterns of unprofessional behavior and egregious violations of professionalism will be presented to the Academic Standards and Achievement Committee (ASAC) that acts on behalf of the faculty of the School of Medicine. This policy specifies how ASAC will deal with student academic deficiencies in courses, clerkships, electives, the Clinical Practice Examination (CPX) and with failures on the United States Medical Licensing Examination (USMLE) Step 1 and Step 2 examinations, including compliance with the Standards for Academic Standing (see end of this document).

**Definition of Academic Failure:** The courses and electives in the pre-clerkship and post-clerkship phases of the Next Generation Curriculum, the Family Medicine, Perioperative Medicine and Surgical Subspecialties clerkships are graded as pass/fail (P/F); any F constitutes a failure. The other clerkships are graded with letter grades (A, B, C or F). With the exception of the Patient-Student Partnership Course, a score of 70% or higher is required for successful completion of each course and clerkship. A score lower than 70% constitutes an F; each F constitutes a failure and is documented on the official transcript and the Medical Student Performance Evaluation (MSPE). The Patient-Student Partnership Course requires a score of 80% or higher to pass. Failure to achieve an 80% in this course constitutes a failure and would likewise be documented on the official transcript and the MSPE.

**Professionalism:** Professional attitudes and behaviors are components of the 12 Competencies Required of the Contemporary Physician that enable the independent performance of the responsibilities of a physician and therefore are a requirement for the successful award of the degree of Doctor of Medicine. The School of Medicine’s Professionalism Objectives (<https://med.virginia.edu/ume/wp-content/uploads/sites/216/2015/09/Professionalism-objectives-clerkships3.pdf>) establish general standards applicable to all students in the School of Medicine. However, it is the responsibility of the faculty and the ASAC, as appropriate, to interpret and apply the general Professionalism Objectives to specific situations when concerns are raised about student performance or behaviors.

Evaluation of professional attitudes and behaviors is an integral part of a student’s assessment and generally is accomplished through observation and narrative recording. Praise/Concern Cards and written narratives are assessment tools used to describe behaviors in areas of altruism; honesty and integrity; caring, compassion and communication; respect for others; respect for differences; responsibility and accountability; excellence and scholarship; leadership and knowledge and other skills related to professionalism. These professional attitudes and behaviors are monitored and recorded throughout undergraduate medical education.



Any breach of professionalism resulting in a recorded observation, e.g., Professionalism Concern Card, letter, written report, etc., must be addressed with the student by their college dean and documentation of the discussion must be recorded. If a student receives three or more written observations of concern or is reported for two breaches of the Health Insurance Portability and Accountability Act (HIPAA), or is cited for a single egregious breach of professionalism, notice will be sent to ASAC for review. A student identified as having a pattern of unprofessional behavior may be directed to further counseling and /or to supportive remediation and/or placed on *academic warning* or *academic probation* (as defined below), or if the professional violations are severe, a student may be dismissed from school even if they have passing grades in all courses. ASAC will assess the severity of the problem, the management and the consequences, including possibly reporting the behaviors in the student’s Medical Student Performance Evaluation (MSPE). Egregious behaviors, such as but not limited to assault on or threat to a patient, patient’s family member, student, GME trainee or faculty member, conduct that may constitute a felony, etc., regardless of whether criminal prosecutions are initiated or pursued, will be referred immediately to ASAC, irrespective of whether previous observations of concern exist, with the recommendation for dismissal from school.

**Medical Scientist Training Program Students:** Decisions regarding academic deficiencies of MSTP students during their MD coursework are governed by the ASAC. Final decisions regarding academic deficiencies of MSTP students during their doctoral coursework are determined by the ASAC, but the decision is weighted heavily upon the recommendation of the BIMS Academic Progress and Achievement Committee (BAPAC), which acts as a subcommittee to the ASAC with respect to MSTP students. The BAPAC serves as an institutional oversight committee with representation from all Biomedical Sciences (BIMS)-affiliated degree-granting programs to ensure that individual programs have followed their processes regarding remediation and dismissal for academic deficiencies, ensuring due process for students. The BAPAC assesses whether the policies have been followed and assures fairness and consistency across the interdisciplinary programs comprising BIMS. See individual BIMS-affiliated PhD program standards and “BAPAC Operating Procedures” at <http://bims.virginia.edu/bims-committee-membership/bims-academic-progress-and-achievement-committee/>.

Reports of an MSTP student’s unprofessional, unethical, or illegal activities or behaviors are reviewed and acted upon by the ASAC.

**MD/Public Health Sciences Dual Degree Students:** Decisions regarding academic deficiencies of PHS graduate students during their MD coursework are governed by the ASAC. Final decisions regarding academic deficiencies of PHS graduate students during their PHS coursework are determined by the ASAC, but the decision is weighted heavily upon the recommendation of the PHS Academic Promotion and Achievement Committee (PHS APAC), which acts as a subcommittee to the ASAC with respect to PHS graduate students. See SOM Bylaws, Section 8, Standing Committees, PHS Academic Promotion and Achievement Committee, <https://med.virginia.edu/school-administration/wp-content/uploads/sites/304/2018/02/BYLAWS-February-21-2018.pdf>.

Reports of a PHS graduate student’s unprofessional, unethical, or illegal activities or behaviors are reviewed and acted upon by the ASAC.

**Grading during the Pre-clerkship phase:** The pre-clerkship phase of the Next Generation Curriculum comprises the first three semesters of the educational program. This phase consists of ten graded courses, each assigned a pass/fail grade at the end of the course:

1. Integrated Systems I (first semester)
2. Integrated Systems II (second semester)
3. Integrated Systems III (third semester)
4. Foundations of Clinical Medicine 1-A (FCM 1-A)
5. Foundations of Clinical Medicine 1-B (FCM 1-B)
6. Foundations of Clinical Medicine 1-C (FCM 1-C)
7. Patient Student Partnership 1-A (PSP 1-A)
8. Patient Student Partnership 1-B (PSP 1-B)
9. Patient Student Partnership 1-C (PSP 1-C)
10. Social Issues in Medicine (SIM) (either semester one or two during the first year).

Integrated Systems I consists of the following course components or “systems”: Cells to Society, Foundations of Medicine (FoM), Cells, Blood and Cancer (CBC) and Microbes, Immunity, Transfusion and Transplantation (MITT). Integrated Systems II consists of the following course components: Musculoskeletal Integument System (MSI), Gastrointestinal System (GI) and Mind, Brain and Behavior (MBB). Integrated Systems III consists of the following course components: Cardiovascular System (CV), Pulmonary System (Pulm), Renal System, Endocrine-Reproductive System (Endo-Repro) and Hematology (Heme). In order to receive a passing grade for an integrated system course, a student must have an average score for all systems of 70% or above.

Patient Student Partnership 1 (three courses) runs in tandem with Foundations of Clinical Medicine 1 and introduces students to a longitudinal patient experience. Performance is assessed in at each semester by a P/F grade. Students must achieve an 80% or greater on the requirements for this course in order to pass.

In order to progress to the third semester of the curriculum, a student must have achieved an average score of 70% or higher on Integrated Systems I and Integrated Systems II and have received a P for FCM-1A and 1B, PSP-1A and 1B, as well as Social Issues in Medicine. Failure to meet any one of these criteria will result in a referral to ASAC for review and action. Any requirement for remediation must be completed prior to the beginning of the third semester.

Successful completion of the third semester requires an average score of 70% or higher in the Integrated Systems III course, and a grade of P in FCM-1C and PSP-1C. Failure to meet any one of these criteria will result in a referral to the ASAC for review and action.

**Summative Examinations:** A passing score on a summative examination within a course is 70%. Students achieving less than 70% on a summative assessment will be referred to ASAC with the recommendation from the respective system leader for remediation. If the student is in

good standing professionally, has done well formatively, and has no other academic deficiencies, ASAC generally will allow the student to take a reexamination. The reexamination score, if passing, will be an additional score factored into the cumulative total. If the summative examination is failed the second time with a score lower than 70%, ASAC will review the student's performance again and decide either to allow the student to make a third attempt at a reexamination or repeat the course. The final decision regarding reexamination rests with ASAC. Failure to pass a summative on the third attempt constitutes a failure of the system and therefore failure of the course. Any approved summative reexaminations must be taken according to the approved make-up schedule for the current academic year at the next available examination time as determined by ASAC. A student failing 5 total summative examinations in the pre-clerkship phase of the curriculum will be referred to ASAC and will be considered for dismissal. A student who does not take an examination and who does not have an excused absence, will receive a professionalism concern card and a referral to ASAC.

With regard to anatomy practical examinations, a score of 70% or higher is passing. Individual anatomy practical exam scores factor into the respective organ system grades, e.g., an anatomy practical examination score in MSI factors into the MSI grade and an MBB anatomy practical exam score factors into the MBB grade. Anatomy practical examinations also are graded as a thread across the Integrated System in which they occur, i.e., Integrated Systems II or III. A cumulative score of 70% or higher across the anatomy thread is required to progress to the clerkship phase of the curriculum. Students achieving a cumulative anatomy score of less than 70% for Integrated Systems II (consisting of anatomy practical examinations from MSI, GI and MBB) or Integrated System III (consisting of anatomy practical examinations from CV, Pulmonary, Renal and Endo-Repro) will be referred to ASAC and require remediation. Any remediation required by ASAC will include all anatomy from the semester failed, and the format for reexamination will be at the discretion of the anatomy director. Reexamination must occur by the end of the semester break immediately following the course in which the failure occurred. With approval of the Anatomy Director, remediation may occur during spring break, early summer break or fall break.

One component of assessment in FCM-1 is OSCEs. Students must achieve a passing grade on the OSCEs in FCM to pass the FCM course. A passing grade on the FCM-1B OSCE is required to pass FCM-1B and to progress to the third semester. A passing grade on the FCM-1C OSCE is required to pass FCM-1C and begin clerkships. A failure on the FCM 1 B or 1C OSCE is referred to ASAC for review and action. Typically, ASAC allows a student in good standing to remediate and retest. A second failure of the FCM OSCEs results in an F in the corresponding course and the student will be referred to ASAC for review and action. The FCM-1B OSCE must be passed prior to starting the third semester and the FCM-1C OSCE must be passed prior to starting clerkships.

Completion of the National Board of Medical Examiners Comprehensive Basic Science Exam in the third semester is a requirement of the pre-clerkship curriculum.

**Promotion to Clerkships:** Students who achieve a passing grade in Integrated Systems I, Integrated Systems II, Integrated Systems III, FCM-1A-B-C, PSP-1A-B-C, SIM, have taken USMLE Step 1 and have achieved a passing grade in the Transitions Course may progress to

clerkships. If notification of a failing score on Step 1 is received after a student has begun a clerkship, they generally will be allowed to complete that clerkship. The student will be removed from subsequent clerkships until a retest is completed.

Students in the dual MD/PhD degree program must take USMLE Step 1 prior to entering the PhD portion of the program and must pass Step 1 in order to continue in the graduate program.

**Remediation of Academic Deficiencies in Clerkships:** A passing cumulative numerical score of 70% must be achieved in order to pass a clerkship. The score achieved correlates to an assigned letter grade of A+, A, A-, B+, B, B-, C+, C or C-. Earning a cumulative score of less than 70% constitutes a failure and automatic referral to ASAC, and also requires repeating the clerkship and all its requirements. Even if a student numerically achieves a passing score of 70%, the Clerkship Director may decline to pass a student based upon poor clinical performance and/or concerning issues of professionalism. In this circumstance, the clerkship director will make a recommendation to ASAC regarding their concerns with appropriate documentation. If failure is upheld by ASAC, remediation likely will include repeating the clerkship. When a clerkship requires repeating it will be noted in the MSPE, and the student's transcript will show two enrollments in the same course with two separately determined and reported grades.

**USMLE Subject Examinations in Clerkships:** A passing score on each subject (shelf) examination will be set by the annual recommended passing score determined by the National Board of Medical Examiners. Not achieving this score constitutes a failure of the examination and therefore a deficiency for the clerkship. The student will be assigned an Incomplete on their transcript until the deficiency is removed when the examination is passed. Students who do not achieve a passing score on a shelf examination will be referred to ASAC with the recommendation from the clerkship director for appropriate remediation. Generally, if the student performed well clinically and is in good standing professionally, the student would be able to take a reexamination unless the score on the subject examination is so low that removing the deficiency still will result in a failure. The reexamination grade, if passing, will remove the deficiency from the course; however, the initial score is the only one that will be factored into the final clerkship grade. The final grade then will replace the Incomplete on the transcript. A second failure of the shelf exam will be referred to ASAC for review and action. Should ASAC permit the student to take the shelf examination a third time and the student passes, the clerkship deficiency will be satisfied; however, the first score is still the only one calculated into the clerkship grade. Failure to pass a shelf examination on the third attempt constitutes a failure of the clerkship and will be referred to ASAC for review and action. If approved, shelf reexaminations will occur at the completion of the student's third year. By special arrangement with the clerkship director, a shelf re-examination may be scheduled during summer break, Thanksgiving break, or during the winter holiday break. Depending upon the timing of the clerkship with the deficiency, a student with an outstanding deficiency in a single clerkship may be allowed to continue into the elective portion of the curriculum but will not be allowed to take an elective in the discipline of the clerkship deficiency until the deficiency has been remediated. If a student fails shelf examinations in three different clerkships, the student will be referred to ASAC for review and, unless there are mitigating circumstances, will be considered for dismissal from school.

**Remediation of Academic Deficiencies in the Post-clerkship Phase:** A passing cumulative score of 70% must be achieved to pass the Geriatrics Clerkship in fourth year. Earning less than a 70% constitutes a failure and requires repeating the clerkship and all its requirements. The ACE is a required single 4-week clinical experience selected by the student and is graded Pass/Fail. Students must achieve a passing grade in this course to receive credit. Remediation of a deficiency in an ACE is required. A student must pass the Geriatrics clerkship as well as their selected ACE to meet graduation requirements. Remediation of a deficiency in an elective is not required, however the student will not receive credit toward the MD degree for that elective. A student must meet the elective credit requirements in order to fulfill graduation requirements.

**Incompletes and University Withdrawals:** An Incomplete may be assigned to a course or clerkship on a student's transcript should an emergent situation, e.g., death of immediate family member, illness or accident, etc., arise after the student successfully has completed the majority of the requirements. An Incomplete cannot be assigned as a grade when the student is failing the course or clerkship. When the requirements have been completed, the Incomplete will be removed and replaced by the course or clerkship grade. An Incomplete grade will become an *F* one year after it is issued if not remediated. Grades of *F* will not be changed after remediation.

Should a student need extended time off from medical school, interrupting a course or clerkship, the student must request a leave of absence or withdrawal per School of Medicine Leave of Absence, Withdrawal, Readmission Policy. Any course or clerkship in progress will be graded as *W*. If and when the student is readmitted from a withdrawal, ASAC will determine how much, if any, of the course or clerkship will need to be repeated. The grade of *W* will remain on the student's transcript.

**Graduation:** In order receive the recommendation from ASAC for graduation and conferral of the MD degree, a student must satisfy all academic and professionalism graduation requirements with no outstanding deficiencies. In addition, passing scores on the CPX, USMLE Step 1, USMLE Step 2 Clinical Knowledge and the USMLE Step 2 Clinical Skills are required for graduation.

**Steps 1 and 2 of United States Medical Licensing Examination (USMLE):** In order to advance to the clerkships, a student must successfully complete the pre-clerkship curriculum and must have taken USMLE Step 1 at least 10 days before the Transition course. A student may begin the clerkships pending notification of their Step 1 score. If notification of a failing score on Step 1 is received after a student has begun a clerkship, they generally will be allowed to complete that clerkship. The student then will discontinue clerkships in order to concentrate on retaking and passing Step 1. The Step 1 examination may be taken no more than three times. Three failures of Step 1 will result in the student's dismissal from the School of Medicine, without recourse to the appeals process. The college deans in consultation with the Director of Academic Enhancement may determine, based on a student's academic performance, that the student is at risk of failing USMLE Step 1 and may recommend that the student delay sitting for the examination in order to have more time for preparation. In this circumstance, the student will complete the Transitions Course so the student can return to the clerkships upon satisfactory completion of USMLE Step 1. After successful completion of the core clerkships, the student must take both parts of Step 2 of the USMLE (2 CK and 2 CS). Passing both Step 2

CK and Step 2 CS is required for graduation. Students are allowed a total of three attempts to pass each of the two Step 2 examinations; failure to pass either Step 2 examination for a third time will result in dismissal from medical school, without recourse to the appeals process. Students must pass all required clerkships and take USMLE Step 2 CS and 2 CK no later than November 1 of their last academic year in medical school to ensure an opportunity for remediation prior to residency match and graduation, should a failure occur.

**Clinical Performance Examination:** Students are required to take and pass the Clinical Practice Examination (CPX) after the completion of the clerkships. This is a requirement for graduation. Students failing the CPX are referred to ASAC and should review their performance and address their deficiencies prior to retaking the examination.

**Overall Time Limits:** All requirements for graduation, including passing Step 1, Step 2 CK and Step 2 CS of the USMLE, must be completed within six years from the date the student matriculated in the School of Medicine. For students in the MD/PhD dual degree program, graduation requirements must be completed within nine years; students in the MD/JD program must complete graduation requirements within eight years; for students in other dual degree programs graduation requirements must be completed within seven years. Exceptions to this policy are rare and must be approved by ASAC.

**Testing Accommodations:** When testing accommodations have been granted to a student by the SOM, a student must share their desire to invoke that accommodation at least two weeks prior to a summative assessment and at the time of orientation for clerkships.

**Procedure for Handling a Deficiency or Failure:**

- The Course, System or Clerkship Director notifies both the student and the School of Medicine Registrar/college dean of deficiency or failure.
- The student is withdrawn from clinical responsibilities (if applicable).
- The student is required to meet with their college dean. At this meeting, the Policy on Academic and Professional Advancement is discussed and the student is notified of the next ASAC meeting. The ASAC meetings usually occur monthly. In the pre-clerkship phase of the curriculum, a student who scores less than 70% on a summative assessment shall meet with the system leader and/or the Director of Academic Enhancement to discuss learning strategies to improve performance.
- The student shall be reviewed by ASAC.
- Students may submit a written statement, results of a drug test, results of a Counseling and Psychological Services (CAPS) screening or any other relevant data to ASAC and/or request to meet in person with ASAC.
- All students subject to dismissal or who may be required to repeat an academic period will be offered the opportunity to meet with ASAC.
- ASAC reviews each student’s academic record, takes into account any other relevant information or data and recommendations from a Course or Clerkship Director, and determines remediation or other action based upon the Policy on Academic and Professional Advancement.
- The Chair of ASAC notifies the student in writing of the Committee’s decision.

- If applicable and approved, the Office of Student Affairs schedules the remediation required by ASAC in collaboration with Course or Clerkship Directors taking into account the make-up schedule for that academic year.
- In the cases where a student is asked to repeat an entire segment of the curriculum or is dismissed from the School of Medicine, they can appeal the decision of ASAC following the Appeals Process described below.
- ASAC decisions regarding promotion or graduation due to failure to pass Steps 1, 2 CK or 2 CS of the USMLE or dismissal resulting from three failures cannot be appealed.
- The SOM registrar shall communicate with student, college dean and ASAC to confirm when deficiencies or examination failures have been remediated.

### **Academic Appeals Process:**

- If ASAC requires a dismissal from the School of Medicine or repetition of an academic period, the notification to the student will provide the option of an appeal and a description of the appeals process. This option will not be granted to those students failing to pass Steps 1, 2 CK or 2 CS of the USMLE within three attempts. The student may formally request that the Associate Dean for Student Affairs appoint an ad hoc Appeals Committee to review the decision of ASAC. The student must file their appeal no later than 14 days from receipt of notification or lose the right to appeal.
- The three-person ad hoc Appeals Committee is drawn from a pool of 10 faculty members named by the Associate Dean for Student Affairs, none of whom are current members of ASAC. The student selects one member, the Senior Associate Dean for Education selects one member, and the Dean selects the third member (who chairs the ad hoc Appeals Committee). The Associate Dean for Student Affairs serves as staff liaison, ex officio, without vote.
- The student is permitted to inspect their entire medical school file, including any material upon which the decision of ASAC was based.
- The student is permitted to have counsel, to submit affidavits and exhibits and to summon witnesses at the Appeals Committee hearing. Legal counsel may be present to provide advice, but legal counsel will not be permitted to participate actively in presentation of testimony, examination/cross examination of witnesses or oral arguments.
- The Appeals Committee is to conduct a hearing as soon as possible (ordinarily within 14 days) and will uphold, modify or reverse the decision(s) of ASAC.
- The Appeals Committee will provide the student with all the evidence against him or her, including the academic grades and written evaluations, and will base its recommendations upon the evidence presented at the hearing.
- The Appeals Committee will send its decision, along with a written record of its proceedings, to the Dean of the School of Medicine.
- The decision of the Appeals Committee will be final.

**General Operational Procedures:** ASAC will schedule monthly meetings and will also meet on an as-needed basis (within 10 days of a report, e.g., egregious behavior) to address immediate issues. ASAC may be superseded by University policy or legal action.

**Definitions of Academic Status:** A student may be placed on *academic warning* by ASAC during a specified period in which the student's academic and/or professional deficiencies must be remediated or they will risk progression to *academic probation*.

A student may be placed on *academic probation* by ASAC during a specified period in which the student's academic progress and/or professional behaviors are monitored closely with periodic required reviews by ASAC. The student remains enrolled during this time. The committee may appoint specific faculty to implement remediation and evaluate the student's progress. If deficiencies or failures are not rectified according to the remediation plan set by ASAC within the specified period of time, the student is subject to dismissal from the University. *Academic probation* is reflected on the MSPE.

**Definitions of Academic Standing:** A student is in *good academic standing* if the student makes satisfactory progress, defined as progressing at a pace of completion allowing the student to meet academic requirements to achieve the Doctor of Medicine degree within a six-year limit (150% of the program length) set from matriculation.

A student is *not in good academic standing* if making inadequate academic progress that threatens their ability to achieve the Doctor of Medicine degree within a six-year limit set from matriculation as determined by the Academic Standards and Achievement Committee.

The following are standards for each phase of the curriculum to determine whether or not students are maintaining Satisfactory Academic Progress (SAP).

**Pre-clerkship Phase:** A student is declared *not in good academic standing* if they have failures or an unsatisfactory in any course or system that are not successfully remediated at the time of the first day of class, third semester.

A student is declared *not in good academic standing* if they have >2 course Incompletes and/or Withdrawals and if the Incompletes or Withdrawals are not remedied at the time of the first day of class, third semester.

A student is declared *not in good academic standing* if they have failures or an unsatisfactory in any course that are not successfully remediated at the time of the first day of period one of the clerkships.

A student is declared *not in good academic standing* if they have >2 course Incompletes and/or Withdrawals and if the Incompletes or Withdrawals are not remedied at the time of the first day of period one of the clerkships.

A student is declared *not in good academic standing* if they do not pass USMLE Step 1 on the second attempt.

**Clerkship Phase:** A student is declared *not in good academic standing* if they have >2 deficiencies (failing 2 or more clerkships with an *F*) and if the deficiencies are not remediated at the time of four months from the end of the 48-week clerkship period.



A student is declared *not in good academic standing* if they have >2 Incompletes or Withdrawals and if the Incompletes and/or Withdrawals are not remedied at the time of four months from the end of the 48-week clerkship period.

A student is declared *not in good academic standing* if they fail to pass either part of USMLE Step 2 on the second attempt.

**The Post- Clerkship (Elective) Phase:** The student is declared *not in good academic standing* if not making adequate progress to achieve the Doctor of Medicine degree within the time limit set from matriculation.

The student is declared *not in good academic standing* if they receive two or more unsatisfactory elective evaluations.

**Original Effective Date April 1, 2012. Revised August 15, 2013; August 15, 2014; July 2015; November, 2015 ; July, 2016; June 2017 and July 2018**

[Redacted]

**From:** [Redacted] on behalf of [Redacted]  
**Sent:** Friday, May 4, 2018 10:52 AM  
**To:** [Redacted]  
**Subject:** [som-studentaffairs] Concern Card

### Concern Card

**Faculty Information:**

**From:** [Redacted]  
**Name:** Attendance Monitor  
**Department:** MedEd  
**Phone Number:**  
**E-mail:** [Redacted]

**Student Information:**

**Student Name:** Kieran Bhattacharya  
**Class Year:** SMD21  
**Date:** May 4, 2018

**Concerns Based On:**

**Areas:**

**Comments:**

**Student did not attend the required Patient Presentation on May 2, 2018.**

**Contact Issues:**

**I have discussed my concerns with the student: no**  
**I feel uncomfortable discussing my concerns with the student: no**  
**Please call me about these concerns: no**

- 1 hour audio recording of Social Issues in Medicine (SIM) discussion on microaggressions hosted by American Medical Women's Association at a lecture hall in the University of Virginia School of Medicine
- Plaintiff participates in discussion from 28:40 to 34:00



[Redacted]

3 messages

[Redacted]

[Redacted]

**Forwarded Conversation**

**Subject: Fw: The panel today**

From: **Bhattacharya, Kieran R \*HS** [Redacted]  
Date: Thu, Nov 29, 2018 at 2:31 AM

[Redacted]

From: Peterson, Christine M [Redacted]  
Sent: Thursday, October 25, 2018 2:59 PM  
To: Bhattacharya, Kieran R \*HS  
Subject: The panel today

Kieran,  
I was at the noontime "Microaggressions" panel today and observed your discomfort with the speaker's perspective on the topic.  
Would you like to come share your thoughts with me? I think I can provide some perspective that will reassure you about what you are and are nor responsible for in interactions that could be uncomfortable even when that's not intended. If you'd prefer to talk with your own college dean, that's fine too. I simply want to help you understand and be able to cope with unintended consequences of conversations.  
Dr. Peterson

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From: **Bhattacharya, Kieran R \*HS** [Redacted]  
[Redacted]

From: Bhattacharya, Kieran R \*HS  
Sent: Thursday, October 25, 2018 4:30 PM  
To: Peterson, Christine M  
Subject: Re: The panel today

?Dr. Peterson,

Your observed discomfort of me from wherever you sat was not at all how I felt. I was quite happy that the panel gave me so much time to engage with them about the semantics regarding the comparison of microaggressions and barbs. I have no problems with anyone on the panel; I simply wanted to give them some basic challenges regarding the topic. And I understand that there is a wide range of acceptable interpretations on this. I would be happy to meet with you at your convenience to discuss this further.

[Redacted]

Sincerely,

Kieran Bhattacharya

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From: Bhattacharya, Kieran R \*HS [REDACTED]

-----  
From: Peterson, Christine M [REDACTED]  
Sent: Thursday, October 25, 2018 7:1  
To: Bhattacharya, Kieran R \*HS  
Subject: RE: The panel today

Kieran,  
I understand. I don't know you at all so I may have misinterpreted your challenges to the speaker.  
Would Wed 10/31 at 4 pm work for you?  
I'll be in my Student Health office in the Gyn Clinic. Please let the receptionist know when you arrive.  
Many thanks,  
Dr. P.

-----Original Message-----  
From: Bhattacharya, Kieran R \*HS [REDACTED]  
Sent: Thursday, October 25, 2018 4:30 PM

-----  
[REDACTED]

-----  
From: Bhattacharya, Kieran R \*HS [REDACTED]  
Sent: Saturday, October 27, 2018 2:46 PM  
To: Peterson, Christine M  
Subject: Re: The panel today

10/31 at 4pm works fine; I'll see you then!

-----  
From: Bhattacharya, Kieran R \*HS [REDACTED]

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From: Peterson, Christine M [REDACTED]  
Sent: Monday, October 29, 2018 11:28 AM  
To: Bhattacharya, Kieran R \*HS  
Subject: RE: The panel today

Great - thanks.  
Dr. P.

-----Original Message-----  
From: Bhattacharya, Kieran R \*HS [REDACTED]  
Sent: Saturday, October 27, 2018 2

[Redacted]

**From:** [Redacted]  
**Sent:** Thursday, October 25, 2018 9:04 PM  
**To:** [Redacted]  
**Subject:** [Redacted]

## Concern Card

### Faculty Information:

**From:** [Redacted]  
**Name:** Nora Kern  
**Department:** Urology  
**Phone Number:**  
**E-mail:** [Redacted]

### Student Information:

**Student Name:** Kieran Bhattacharya  
**Class Year:** 2  
**Date:** 10/25/18

### Concerns Based On:

#### Areas:

- Respect for Others
- Respect for Differences

#### Comments:

For a AMWA session, we held a panel on micro aggression. Myself and 2 other faculty members were invited guests. This student asked a series of questions that were quite antagonistic toward the panel. He pressed on and stated one faculty member was being contradictory. His level of frustration/anger seemed to escalate until another faculty member defused the situation by calling on another student for questions. I am shocked that a med student would show so little respect toward faculty members. It worries me how he will do on wards.

#### Contact Issues:

**I have discussed my concerns with the student: no**

**I feel uncomfortable discussing my concerns with the student: no**



[Redacted]

[Redacted]

[Redacted]

[Redacted]

From: **Bhattacharya, Kieran R \*HS** [Redacted]  
Date: Thu, Nov 29, 2018 at 2:44 AM  
To: [Redacted]

From: Densmore, John J \*HS (MD-Internal Medicine)  
Sent: Friday, October 26, 2018 1:12 PM  
To: Bhattacharya, Kieran R \*HS  
Subject:

Hi Kieran,  
I just wanted to check in and see how you were doing. I hope the semester is going well.  
I'd like to meet next week if you have some time.

JJD

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From: **Bhattacharya, Kieran R \*HS** [Redacted]  
Date: Thu, Nov 29, 2018 at 2:44 AM  
To: [Redacted]

From: Bhattacharya, Kieran R \*HS  
Sent: Saturday, October 27, 2018 2:48 PM  
To: Densmore, John J \*HS (MD-Internal Medicine)  
Subject: Re:

Hi Dean Densmore,

I would be happy to meet with you at your convenience next week.

Sincerely,

Kieran Bhattacharya

-----  
[Redacted]

Date: Thu, Nov 29, 2018 at 2:45 AM

To: [Redacted]

From: Densmore, John J \*HS (MD-Internal Medicine)  
Sent: Monday, October 29, 2018 5:19 PM  
To: Bhattacharya, Kieran R \*HS  
Subject: RE:

Great. would noon Thursday work?

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From: **Bhattacharya, Kieran R \*HS** [Redacted]  
Date: Thu, Nov 29, 2018 at 2:45 AM  
To: [Redacted]

From: Bhattacharya, Kieran R \*HS  
Sent: Tuesday, October 30, 2018 5:55 PM  
To: Densmore, John J \*HS (MD-Internal Medicine)  
Subject: Re:

Yup! See you then!

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]





# UNIVERSITY of VIRGINIA

SCHOOL OF MEDICINE

## MINUTES Academic Standards & Achievement Committee MR 5 3005 Wednesday, November 14, 2018

The meeting was called to order at 4:03 p.m. Present were Drs. Jim Tucker (chair), Brian Behm, Donna Chen, Stephen Culp, Pam Herrington, Nicholas Intagliata, Nora Kern, Wilson Miller, Barnett Nathan, Catherine Shaffrey, as well as [REDACTED] (students)  
Non- voting members: Megan Bray, Lesley Thomas, Selena Noramly, and Katherine Yates.  
Guests: David Lewis, Lynne Fleming, Chris Peterson, Sean Reed.  
Absent: Drs. Roger Abounader, Robert Bloodgood, Sharon Diamond-Myrsten, and Angelique Redus-McCoy.  
On leave: Dr. Katheryn Frazier.

### Minutes

Committee voted unanimously to accept minutes from October 17, 2018.

[REDACTED]

[REDACTED]

### Professionalism Issues

The committee voted unanimously to send Kieran Bhattacharya (Densmore) a letter reminding him of the importance in medicine to show respect to all: colleagues, other staff, and patients and their families.

[REDACTED]

[REDACTED]

The meeting was adjourned at 5:18 pm.  
Minutes respectfully submitted by:  
Katherine Yates 11/27/18

# Academic Standards and Achievement Committee Operating Procedures

The Academic Standards and Achievement Committee (ASAC) of the University of Virginia School of Medicine (UVA SOM) is charged with the responsibility of ensuring that each student in the School of Medicine masters the education program objectives. These objectives include assuring that each student demonstrate the required level of academic accomplishment and the required level of professionalism as set forth in the Twelve Competencies Required of the Contemporary Physician (<http://www.medicine.virginia.edu/education/medical-students/UMEd/curriculum/competencies-page>) in order to be promoted and to graduate with the degree of Doctor of Medicine. As part of these Competencies, students must develop the ability to understand the nature of and demonstrate professional and ethical behavior in the act of medical care. Among the attributes that go into making up these Competencies are respect, responsibility and accountability, excellence and scholarship, honor and integrity, altruism, leadership, cultural competency, caring and compassion, and confidentiality. The UVA SOM Curriculum Committee establishes these educational and professionalism standards. The ASAC oversees, monitors and enforces these standards. Comprised of faculty in the school of medicine who do not assign final grades to students as well as student representatives, the role of the ASAC is to promote students who meet these required standards, to recommend remedial action for those who do not meet the standards, and to suspend or to recommend dismissal of those students who are incapable or who choose not to meet the required standards of achievement within the time frame allotted for completion of the M.D. degree.

It is the policy of the School of Medicine to give every qualified and committed student the opportunity to graduate; however, the School reserves the right, in its sole and absolute discretion, to make judgments about who has or has not demonstrated the necessary qualifications to earn a degree and to practice medicine competently.

## I. Name and Mission

This committee of the Faculty and students shall be called the Academic Standards and Achievement Committee (ASAC). The mission of the ASAC is twofold. The first is to review the UVA SOM transcripts of students who have failed one or more required activities. Depending on the circumstance, the committee can recommend review, remediation or repeating the activity. The second is to review evidence of unprofessional, unethical or illegal activities or behaviors by the students. Recommendations, based on the severity and persistence of these activities or behaviors, can result in a broad range of actions from remediation to dismissal from the university. The committee shall follow the guidance of the Policy on Academic and Professional Advancement and the Policy on Technical Standards Required for Matriculation, Progression and Graduation.

The ASAC will meet monthly and as often as necessary to carry out these missions assuming an agenda to be discussed.

## II. Composition

The Committee shall consist of several groups of voting members and non-voting members.

**Voting members:**

The Senior Associate Dean for Education solicits nominations from department chairs and the faculty at large and recommends potential members to the UVA SOM Dean for appointment. A minimum of 15 voting members are appointed with a maximum of 21 voting members. Two fourth-year medical students shall serve as ex officio voting members of the ASAC. These shall be the President of the Mulholland Society and the fourth-year class President. Generally, the term will be three years with the possibility of one consecutive reappointment; former members may return for a new appointment after a two-year hiatus. Student members will serve for one year. The Chair is appointed by the Dean of the School of Medicine. A vice-chair is elected by a majority vote of the ASAC. The vice chair may call and chair an ASAC meeting in the event that the chair is unavailable.

Members who fail to attend the majority of meetings during a given calendar year without cause shall be excused from the Committee. Members who cannot attend the majority of the meetings due to illness or sabbatical, etc. may request that the ASAC Chair, in consultation with the Senior Associate Dean and subject to the approval of the Dean, appoint a substitute for them for the duration of their absence.

**Non-voting members:**

The Associate Dean for Admissions and Student Affairs, Associate Dean for Diversity and Inclusion, the Director of Academic Enhancement, and the Assistant Dean for Medical Education shall be non-voting ex officio members of the ASAC. The Registrar shall staff the committee and keep minutes as described below.

**III. General policies**

A. Official votes may be taken when a quorum (greater than 50% of voting members) is present. All motions, except for a motion for dismissal, shall pass by majority of voting members present. A motion for dismissal requires a two-thirds majority of voting members. Voting members will be recused from participating and shall not be counted in the quorum if they have (or have had) a personal, mentoring or advising relationship with the student beyond that of usual student-faculty contact in class or clinical environment. This restriction includes faculty mentors on research projects, family members, anyone with a physician-patient relationship with the student or other personal relationship.

B. All members are required to sign a confidentiality agreement at the beginning of each academic year.

C. The Registrar shall take minutes of each meeting with special emphasis being applied to recording every official motion, and the numerical vote taken on that motion. Official letters sent to students also will constitute part of the minutes of each meeting, as they summarize the decisions of the Committee. Minutes of all meetings will be kept in the Office of Student Affairs and will be made available to the Dean. Letters from the chair to individual students shall be kept in the students' academic file in the Office of Student Affairs. A notice is sent to the Dean after

each meeting indicating that a meeting was held and that the confidential minutes are available for review in the Office of Student Affairs.

D. When there are severe professional transgressions or the Committee is to consider serious actions such as suspension or dismissal of a student, a final vote should be taken by the Committee only after the student has been offered an opportunity to address the Committee in person, and to respond to questions from members of the Committee. Also, the student should be notified by the Committee in writing before the meeting as to what the major concerns of the Committee are likely to be during the coming meeting. Assistant Deans for Student Affairs (College Deans) as well as relevant teaching faculty may also be invited to attend committee meetings to provide information.

E. Consistent with the requirements of law, decisions made by the Committee may be revealed to authorized university personnel, to the student, and in appropriate circumstances, to the student's parents or guardians (especially when the personal safety of the student is a concern). Other individuals may be notified as appropriate.

F. Official notification of Committee actions shall be made by the Registrar as soon as possible after the action is taken by the ASAC (and after the student has been notified of the action, as in III.C above, III.I below). All individuals and departments with a need to know will be so notified.

G. The official medical school transcript shall accurately reflect the actual academic record of the student, and important decisions reached by the Committee about each student's academic performance or misconduct (for example, reflecting change in student status, systems failed, grades changed through re-examination, suspensions, etc.).

H. When a student addresses the Committee, the student will act as his or her own advocate. In some sensitive situations, the student may be accompanied by a current member of the medical school community (e.g. classmate, faculty member, etc.) for support or advice. Such a guest must be approved by the committee chair prior to the meeting. Since these are not formal legal proceedings, but internal meetings of an official school committee, no counsel representing a student shall be allowed.

I. The formal decisions of the ASAC shall be communicated by the Chair to the student in a timely fashion, usually on the night of the meeting or the next day. Copies of this communication will be placed in the student's academic record, and into the minutes of the ASAC. In some situations, such as when news of a decision is given verbally to the student, the Chair may invite one of the college deans to be present.

J. Guidelines and policies written in advance cannot cover all possible scenarios. When in doubt, the Committee should be guided by several important general principles, including: fairness to students; following due process; promptness of action and notification; maintaining confidentiality when possible; and, balancing the best interests of each student with its obligations to the Faculty, patients and to society to train graduates who demonstrate the highest standards of academic performance and conduct.

K. Administrative support to the Committee will be provided by the Registrar who will work with the Chair to set the agenda; inform members of meeting dates and times; take and maintain the minutes; maintain official student folders; maintain copies of all letters sent by the Chair; invite guests, e.g. system or clerkship directors when necessary, etc.

L. These policies concerning the ASAC, and various types of student status changes, must be updated as needed. The updated version must be posted in the online Student Handbook. The incoming first year class must receive a URL link to the latest version at the time of matriculation.

M. No student will be formally dismissed or suspended prior to an appropriate hearing by the ASAC, as outlined in other sections. However, on rare occasions an emergency may arise in which the health of a student, faculty member, patient, or other member of the community is placed at risk by the presence of a student. In such an unusual situation, the Chair of the ASAC may recommend to the Dean or Senior Associate Dean for Education that a student be suspended provisionally, pending formal consideration of the relevant issues by the full Committee at the earliest possible opportunity. It is anticipated that this action will be required only under very rare circumstances.

N. When a student wishes to contest a decision of the ASAC, the student must follow the process as outlined in the Policy on Academic and Professional Advancement.

- If the ASAC requires a student to be dismissed from the School of Medicine or to repeat an academic period, the notification to the student will provide the option of an appeal and a description of the appeals process. This option will not be granted to those students failing to pass Steps 1 or 2CK of the USMLE within three attempts. The student may formally request that the Associate Dean for Admissions and Student Affairs appoint an ad hoc Appeals Committee to review the decision of the ASAC. The student must file his or her appeal no later than 14 days from receipt of notification or lose the right to appeal.
- The three-person ad hoc Appeals Committee is drawn from a pool of 10 faculty members named by the Associate Dean for Admissions and Student Affairs, none of whom is a current member of the ASAC. The student selects one member, the Senior Associate Dean for Education selects one member, and the Dean selects the third member (who chairs the ad hoc Appeals Committee). The Associate Dean for Admissions and Student Affairs serves as staff liaison, ex officio, without vote.
- The student is permitted to inspect his/her entire medical school file including any material upon which the decision of the ASAC was based.
- The student is permitted to have counsel, to submit affidavits and exhibits, and to summon witnesses at the Appeals Committee hearing. Legal counsel may be present to provide advice but legal counsel will not be permitted to participate actively in presentation of testimony, examination/cross examination of witnesses or oral arguments.
- The Appeals Committee is to conduct a hearing as soon as possible (ordinarily within 14 days) and will uphold, modify or reverse the decision(s) of the ASAC.
- The Appeals Committee will provide the student with all the evidence against him/her, including the academic grades and written evaluations, and will base its recommendations upon the evidence presented at the hearing.

- The Appeals Committee will send its decision, along with a written record of its proceedings, to the Dean of the School of Medicine.
- The decision of the Appeals Committee will be final.

Jim Tucker's Bio

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**Jim Tucker's Bio**

**Jim B. Tucker, M.D.**

**Address:**

*University of Virginia Health System  
Department of Psychiatry & Neurobehavioral Sciences  
Division of Perceptual Studies  
P.O. Box 800152*

Charlottesville, VA 22908-0152

Phone: 434-924-2281

Fax: 434-924-1712

email: jbt8n@virginia.edu

Website: www.jimbtucker.com

**Director of the Division of Perceptual Studies**, University of Virginia Health System. September 2014-present.

**Bonner-Lowry Professor of Psychiatry and Neurobehavioral Sciences**, University of Virginia Health System. 2017-present.

**Bonner-Lowry Associate Professor of Psychiatry and Neurobehavioral Sciences**, University of Virginia Health System. 2012-2017.

**Associate Professor of Psychiatry and Neurobehavioral Sciences**, University of Virginia Health System. 2010 – 2012.

**Assistant Professor:** Division of Perceptual Studies, Department of Psychiatry and Neurobehavioral Sciences, University of Virginia Health System. 1999-2010.

**Assistant Professor:** Division of Child and Family Psychiatry, Department of Psychiatry and Neurobehavioral Sciences, University of Virginia Health System. 2000 – 2010.

**Interim Division Director:** July 1, 2000 – June 20, 2001.

**Medical Director:** Child and Family Psychiatry Clinic. July 1, 2003 – June 30, 2012.

**Private Practice of Child, Adolescent, and Adult Psychiatry:**

- Psychiatric Associates of the Shenandoah, Fishersville, VA. 1995-2000.



- Piedmont Psychiatric Professionals, Waynesboro, VA. 1991-1995.

**Attending Psychiatrist:**

- **Service Director:** Adolescent Residential Treatment Program, Charter Behavioral Health System, Charlottesville, VA. 1997 – 1999.
- DeJarnette Center, Staunton, VA. 1991 – 1992.

**Board Certification**

**American Board of Psychiatry and Neurology**

- General Psychiatry 1992
- Child and Adolescent Psychiatry 1992

**Postgraduate Training**

- **General Psychiatry:** Department of Psychiatric Medicine, University of Virginia Health Sciences Center. 1986-1989.
- **Child Psychiatry:** Division of Child and Family Psychiatry, University of Virginia Health Sciences Center. 1989-1991.

**Education**

**M.D.:** University of North Carolina School of Medicine, 1986.

**B.A.:** University of North Carolina-Chapel Hill, 1982.

- B.A. in Psychology
- Phi Beta Kappa

**Publications**

Tucker JB. Religion and medicine. [Letter] *Lancet* 353:1803, 1999.

**ASAC Committee Members**

**Chair**

Jim Tucker, M.D. (Child Psychiatry) *3 years, 2017-2020*

**Committee Members**

- Roger Abounader, M.D., Ph.D. (Microbiology) 3 years, 2017-2020
- Taison Bell (Medicine, Pulmonary and Critical Care) 3 years, 2019-2022
- Donna Chen, M.D., M.P.H. (Psychiatry and Public Health Sciences) 3 years, 2017-2020
- Sharon Diamond-Myrsten, M.D. (Family Medicine) 3 years 2018-2021
- Linda Duska, M.D. (Obstetrics and Gynecology) 3 years, 2019-2022
- Jay Fox, Ph.D. (Microbiology, Immunology, and Cancer Biology) 3 years, 2019-2022
- Katheryn Frazier, M.D., (Pediatrics) 3 years, 2018-2021
- James Gorham, M.D., Ph.D. (Pathology) 3 years, 2019-2022
- Pamila Herrington, M.D. (Psychiatry) 3 years, 2019-2022
- Nicolas Intagliata, M.D. (Medicine GI) 3 years, 2018-2021
- Jessica Meyer, M.D. (Pediatrics) 3 years, 2019-2022
- Wilson Miller, Ph.D. (Radiology) 3 years, 2018-2021
- Catherine Shaffrey, M.D., (Anesthesiology) 3 years, 2018-2021

**Students (appointed for one year):**

- Sarah Dudley (President of Mulholland Society), SMD'20
- John-Henry Dean (President of Fourth-year Class), SMD'20

**Non-voting, ex-officio**

- Megan Bray, M.D. (Associate Dean for Curriculum)
- John Densmore, M.D., Ph.D. (Associate Dean for Admissions and Student Affairs)
- Selina Noramly, Ph.D. (Director of Academic Enhancement)
- Lesley Thomas, J.D. (Assistant Dean for Medical Education)
- Gregory Townsend, M.D. (Associate Dean for Diversity and Inclusion)
- Katherine Yates (Registrar)

**On Leave**

- Brian Behm, M.D. (Medicine GI) 3 years, 2017-2020

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**Brian W Behm, MD**

**Division:** Gastroenterology and Hepatology

**Department:** Medicine

Call 434.243.3090

**Primary Location:**

Digestive Health Center  
1215 Lee St.  
Charlottesville, VA 22903

 Directions

**Fax:** 434.244.7527

**Secondary Locations:** Endoscopy Monroe Lane, Endoscopy Unit

## Expertise

**ABMS Certification:** Internal Medicine; Gastroenterology

**Research Interests:** Dr. Behm's research interests include understanding the pathogenesis of intestinal inflammation, methods to improve patient medication adherence, and clinical trials evaluating new therapies for Crohn's disease and ulcerative colitis.

**Clinical Practice:** Inflammatory Bowel Disease (IBD), Ulcerative Colitis, Colonoscopy, Flexible Sigmoidoscopy, Upper GI Endoscopy, Crohn's Disease, Endoscopy

## About

**Title:** Associate Professor

### Biography

Dr. Brian Behm is a gastroenterologist focused on treating patients with inflammatory bowel disease (IBD). He is an associate professor of medicine and is board certified in gastroenterology.

Dr. Behm was born in northeast Ohio. He completed his undergraduate studies at Cornell University, graduating with distinction. He earned his medical degree at the University of Virginia, then completed an internal medicine residency at the University of California, San Francisco. He returned to UVA for his gastroenterology fellowship, then joined the UVA faculty in 2006. He went on to earn a master's degree in health evaluation sciences from UVA in 2007.

Along with other services, Dr. Behm treats microscopic colitis, pouchitis and indeterminate colitis.

Dr. Behm lives in Charlottesville and enjoys hiking, bicycling and kayaking.

## Education

**Primary:** University of Virginia School of Medicine, 1999

**Residency:** Internal Medicine, University of California at San Francisco

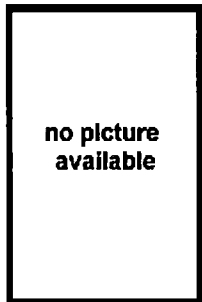
**Fellowships:** Gastroenterology, University of Virginia

## Media

**Publications:** View all publications on PubMed

Department of Psychiatry and Neurobehavioral Sciences

**Donna T. Chen, M.D., MPH**



**Donna T. Chen, M.D.,MPH**  
Associate Professor in Psychiatry  
Associate Professor in Health Evaluation  
Sciences

**Department of Psychiatry and Neurobehavioral Sciences**  
Division of Outpatient Psychiatry

- M.D. Degree:** University of California, San Francisco, 199
- Residency:** Psychiatry, Columbia Universit
- Fellowship** Bioethics and Psychiatry, NIH/NIMH
- Certification:** American Board of Psychiatry and Neurology, 2001
- Research Interests:** Bioethics, research ethics

**Department Web Site:**

<http://www.healthsystem.virginia.edu/i...>

**Phone:**

(434) 924-2241

**Fax:**

(434) 924-5149

**Email:**

dtc6k@virginia.edu

Filed Under: Clinical Faculty

## Menu

## Categories

**CLINICAL FACULTY**

**RESEARCH FACULTY**

200 Jeanette Lancaster Way  
Charlottesville, VA 22903

Map and directions

**SCHOOL OF MEDICINE**

[Redacted]

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STEPHEN H. CULP, MD PHD

### Stephen H. Culp, MD PhD



**Stephen H. Culp, M.D., Ph.D.**

**Faculty Rank:** Associate Professor of Urology

**M.D. Degree:** Medical College of Virginia Commonwealth, 2002

**Ph.D. Degree:** Medical College of Virginia Commonwealth, 2002

**Residency:** Urology, University of Washington School of Medicine

**Fellowship:** Urologic Oncology, University of Texas M.D. Anderson Cancer Center

**ABMS Certification:** Urology

**Clinical Practice:** General Urology, Oncology

**Research Interests:** Molecular characterization of renal cell carcinoma, Resistance to targeted therapy in kidney cancer, Development of xenograft models in kidney and bladder cancer

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Department of Psychiatry and Neurobehavioral Sciences

**Pamila Herrington, M.D.**



**Pamila Herrington, M.D.**  
Assistant Professor of Psychiatric Medicine

**Department of Psychiatry and Neurobehavioral Sciences**  
Division of Inpatient Psychiatry  
Division of Outpatient Psychiatry

<b>M.D. Degree:</b>	University of Virginia, 1993
<b>Residency:</b>	Psychiatry, University of Virginia
<b>Certification:</b>	Psychiatry and Neurology-Psychiatry, 1998
<b>Clinical Interests:</b>	General adult psychiatry
<b>Research Interests:</b>	Psychopharmacology

Frequently Seen:

Department Web Site:

<http://www.healthsystem.virginia.edu/i...>

Phone:

(434) 924-2241

Fax:

(434) 924-5149

Email:

pah5g@virginia.edu

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## Nicolas Intagliata, MD

**Division:** Gastroenterology and Hepatology

**Department:** Medicine

Call 434.243.3090

**Primary Location:**

Digestive Health Center  
1215 Lee St.  
Charlottesville, VA 22903

 [Directions](#)

**Fax:** 434.244.9465

**Secondary Locations:** Endoscopy Unit, Transplant Center

## Expertise

**ABMS Certification:** Internal Medicine; Gastroenterology  
Transplant Hepatology

**Research Interests:** Coagulopathy of liver disease, thrombosis in liver disease, infectious complications of liver disease, outcomes in liver transplantation

**Clinical Practice:** Ascites, Liver Cancer, Esophageal Varices, Hemochromatosis, Hepatic Encephalopathy, Abdominal Paracentesis, Cirrhosis, Liver Biopsy, Upper GI Endoscopy, Endoscopy, Liver Transplant, Liver Care

## About

**Title:** Assistant Professor

### Biography

Dr. Nicolas Intagliata treats patients with liver disease in both inpatient and outpatient settings. He is an assistant professor of medicine in the Division of Gastroenterology and Hepatology and is board-certified in internal medicine, gastroenterology and transplant hepatology.

Dr. Intagliata grew up in Denver, attending the University of Colorado for his undergraduate studies. He earned his medical degree from Wake Forest University in Winston-Salem, N.C., and then came to the University of Virginia to complete a residency in internal medicine and two fellowships – one in gastroenterology and hepatology and the other in transplant hepatology. He joined the UVA faculty in 2014.

His wife, Valentina Intagliata, is also a University of Virginia faculty member, specializing in developmental pediatrics. They have two boys. Dr. Intagliata enjoys running and reading fiction.

## Education

**Primary:** Wake Forest School of Medicine, 2007

**Residency:** University of Virginia, Internal Medicine

**Fellowships:** University of Virginia, Gastroenterology University of Virginia, Transplant Hepatology

## Media

# Dr. Nora Kern



Faculty Rank: Assistant Professor of Urology

M.D. Degree: University of Virginia School of Medicine

Residency: Boston University (Urology)

Fellowship: Children's National Health System/George Washington University (Pediatric Urology)

Board Certifications: Urology

Clinical Practice: Pediatric Urology

Research Interests: Hydronephrosis, Vesicoureteral reflux, Pediatric genitourinary imaging, Quality of care/Education

**Wilson Miller, PhD**



**Wilson Miller,  
PhD**

**Assistant Professor  
of Radiology and  
Medical Imaging**

PhD, Nuclear Physics,  
Princeton University,  
2000

BS, Mathematics,  
University of  
Maryland, 1993

University of Virginia  
Department of  
Radiology and  
Medical Imaging  
480 Ray C Hunt Drive  
Snyder Building  
Charlottesville, VA  
22903

434-243-9216  
gwm2n@virginia.edu



## Barnett R Nathan, MD

**Division:** General Neurology Appointment

**Department:** Neurology

Call 434.924.8371

**Primary Location:**

PO Box 800394  
Charlottesville, VA 22908-0394

 Directions

**Fax:** 434.982.1726

### Expertise

**ABMS Certification:** Neurology; Vascular Neurology; Neurocritical Care

**Research Interests:** Experimental meningitis and brain abscess|the role of substance P and nitric oxide on microglia in CNS inflammation

**Clinical Practice:** Neurocritical Care, Neurology Services

## About

**Title:** Professor

### Biography

I was born in the suburbs of Philadelphia, PA, and attended Harriton High School. I attended Washington College (800 students) on the eastern shore of Maryland. After college, I coached a local high school rowing team while going to graduate school at Villanova University to earn my master's degree in biology. I then attended Hahnemann University School of Medicine (now Drexel University) and moved to Charlottesville in 1993 for my neurology residency. I've been here ever since.

After completing my residency in 1996, I began my two-year fellowship in neurocritical care. I also completed a research fellowship in neuro-infectious diseases. I was awarded a KO8 NIH training grant from the Institute of Allergy and Infectious Disease for my work with microglia in bacterial meningitis. I became faculty in 1999 and have taken on the leadership role as one of the course directors and system leaders for neurology and neuroscience courses for first and second year medical students.

My current clinical focus is exclusively inpatient. I work in the neuro ICU and care for critically ill neurology and neurosurgery patients.

I am married to Kathy Nathan. She is a physical therapist at Martha Jefferson Hospital. Together we have three children: Isaak, Ari and Asher. Nature photography is one of my passions.

## Education

**Primary:** Hahnemann University, 1992

**Residency:** Neurology, University of Virginia

**Fellowships:** Neurologic Intensive Care/Neuroinfectious Diseases, University of Virginia

1215 Lee Street

Charlottesville, VA 22903





## Catherine C Shaffrey, MD

**Division:** General Anesthesiology Appointment

**Department:** Anesthesiology

Call 434.924.2283

**Primary Location:**

PO Box 800710  
Charlottesville, VA 22908-0710

 [Directions](#)

**Fax:** 434.982.0019

### Expertise

**ABMS Certification:** Anesthesiology, 1996

**Research Interests:** Clinical research in ambulatory surgery outcomes

## About

**Title:** Assistant Professor


## Education

**Primary:** Dartmouth Medical School, 1988

**Residency:** Anesthesiology, University of Virginia

**Fellowships:** Advanced Clinical Anesthesia and Pain Management, Derriford Hospital, Plymouth, England

1215 Lee Street  
Charlottesville, VA 22903

 [Map & Directions](#)

## UVA HEALTH

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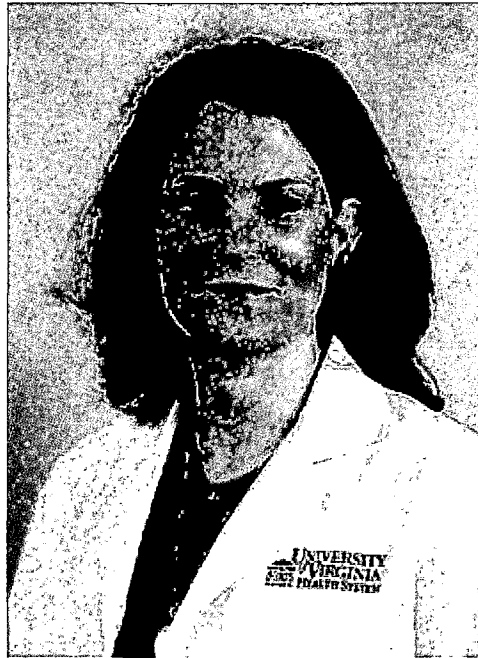
## COMMUNITY

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## Megan J Bray, MD

**Division:** General Obstetrics and Gynecology

**Department:** Obstetrics and Gynecology

Call 434.243.4570

**Primary Location:**

University Physicians for Women Northridge  
Third Floor  
2955 Ivy Rd. (250 West)  
Charlottesville, VA 22903

 Directions

**Fax:** 434.295.5491

**Secondary Locations:** General Obstetrics, General Gynecology

# Expertise

**ABMS Certification:** Obstetrics and Gynecology

**Clinical Practice:** Atrophic Vaginitis, Chlamydia, Ectopic Pregnancy, Endometriosis, Genital Herpes, Gonorrhea, Miscarriage, Ovarian Cyst, Postpartum Depression, Premenstrual Syndrome (PMS), Syphilis, Threatened Abortion, Urinary Tract Infection (UTI), Uterine Fibroids (Fibromyoma), Cesarean Birth, Hysterectomy-Open Surgery, Laparoscopy, Myomectomy, Hysteroscopy, Pregnancy/Birth, Pelvic Inflammatory Disease (PID), Women's Health, OB/Gyn, Primary Care

# About

**Title:** Associate Professor

## Biography

Megan Bray, MD, specializes in the care of women with a wide range of general obstetric, gynecologic and surgical issues. She is an associate professor of obstetrics and gynecology as well as the department's director for its Third Year Clerkship. She is also the associate dean of curriculum for UVA School of Medicine.

Dr. Bray completed her undergraduate studies at Duke University and earned her medical degree from Thomas Jefferson Medical School in Philadelphia. She came to the University of Virginia to complete her internship and residency in obstetrics and gynecology, and then took a position as a generalist at Georgetown University in Washington, D.C. for six years. In 2005, she returned to UVA, joining the faculty. In 2013, she was selected as one of the Top 20 Medical & Nursing Professors in Virginia by StateStats.org.


Outside of her role at UVA, Dr. Bray is married and the proud mother of two young sons.

# Education

**Primary:** Jefferson Medical College, 1995

**Residency:** Obstetrics and Gynecology, University of Virginia

1215 Lee Street  
Charlottesville, VA 22903

 [Map & Directions](#)

## The Listening Post

Click below to leave an anonymous report to the Office of Educational Affairs.

### Leave a Report

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**Medical Student Advocacy** seeks to promote and support a welcoming and professional environment for students in the School of Medicine and associated educational and clinical settings.

We are available to hear reports of mistreatment. These reports may involve sexism, racism, harassment, discrimination, verbal abuse, and other types of unprofessional behavior directed at students.

Medical students can make reports about mistreatment or unprofessional behavior in person, by phone or email. Medical students can also make reports about mistreatment or unacceptable behaviors in person or by phone or email to the Office of Educational Affairs, through the Assistant Dean for Medical Education, Lesley Thomas, available at (434) 924-1864 or llt6p@virginia.edu. Anonymous reports to the Office of Educational Affairs can be made using the Listening Post.

The University also has a web site for all students for reporting bias complaints: <http://www.virginia.edu/justreportit/>

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tionally, the University Ombuds, [REDACTED], by [REDACTED] within the

Health System. The services of the Ombuds are independent of the University administration and confidential to the extent permitted by law. Note that the Ombuds must report sexual misconduct disclosures (Title IX). For more information, visit <http://eocr.virginia.edu/ombuds>.

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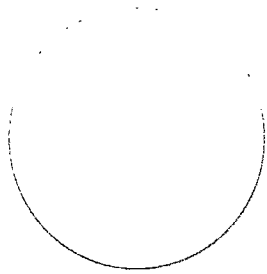
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Selina Noramly



### Selina Noramly

Director of Academic Enhancement at University of Virginia School of Medicine  
Charlottesville, Virginia Area · 110 connections



University of Virginia



Weill Cornell Graduate School of Medical Sciences

### About

Educator.



Selina Noramly

## Experience

### University of Virginia

15 years 4 months

#### Director of Academic Enhancement, University of Virginia School of Medicine

2014 – Present · 5 years

Charlottesville, Virginia Area

#### Assistant Professor of Medical Education, University of Virginia School of Medicine

Jun 2004 – Present · 15 years 4 months

Systems Leader and Thread Leader at the University of Virginia School of Medicine.

#### Visiting Professor

Washington and Lee University

Aug 2003 – Jun 2004 · 11 months

#### Post-doctoral Fellow, Department of Biology

University of Virginia

Mar 2000 – Jul 2003 · 3 years 5 months

## Education

### Weill Cornell Graduate School of Medical Sciences

PhD · Cell Biology

1992 – 1998

### University of Oxford

BA, MA · Pure and Applied Biology



Selina Noramly

**All-University Teaching Award**

University of Virginia

May 2014

<http://news.virginia.edu/content/uva-s-award-winning-teachers-inspire-love-learning-lasts#noramly>

Languages

Malay

German

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[REDACTED]  
[REDACTED]  
**Katherine Yates**

Registrar

Contact Me for: Clerkship Scheduling, Enrollment, Leaving and Returning from the University

(434) 924-5200

kam5vd@virginia.edu

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



# David Charles Lewis (dcl9g)

MD-DMED SOM IT BI  
Business Intelligence Lead

[Redacted]

Staff

## All Affiliations

MD-DMED SOM IT BI  
Business Intelligence Lead

1350 Jefferson Park Ave CHARLOTTESVILLE, VA 22903

➔ [Redacted]



# THE OFFICE OF THE UNIVERSITY COUNSEL

HOME / LYNNE FLEMING

# Lynne Fleming

*Associate University Counsel*

E-mail: [erf3df@virginia.edu](mailto:erf3df@virginia.edu)

Telephone: 434-924-2497

Fax: 434-982-3070

Address: McKim Hall, P. O. Box 800811, Charlottesville, VA 22908

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Telephone: 434-924-3685



Lynne Fleming (Law '85) currently serves as Associate University Counsel and Senior Assistant Attorney General at the University of Virginia. Her work at the University focuses on the University's Medical Center

and the School of Medicine, providing advice and counseling on issues and policies that affect both staff and patients, including advising in medical malpractice cases, Health Regulatory Board investigations, guardianship and conservatorship proceedings for Medical Center patients, and patient safety. She graduated magna cum laude with her bachelor's degree from Mount Holyoke College. She received a Ph.D. in Psychology from Syracuse University and her law degree from the University of Virginia School of Law. Ms. Fleming joined the University Counsel's Office in 2001.

*Practice Areas: Health Care - Patient Services including Medical Center clinical care, Patient Safety, Medical Center Risk Management, Health System policy review, Health Regulatory Board, HSB Quality Subcommittee, Accreditation/Licensure, Pharmacy/controlled substances, Graduate medical education and Ethics Consult Services*

Office of the University Counsel  
Madison Hall  
P.O. Box 400225  
Charlottesville, VA 22904

**PHONE:** 434-924-3586

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## Christine Peterson, MD

**Division:** General Obstetrics and Gynecology

**Department:** Obstetrics and Gynecology

Call 434.924.2773

**Primary Location:**

PO Box 800712  
Charlottesville, VA 22908-0712

 [Directions](#)

**Fax:** 434.243.6689

### Expertise

**ABMS Certification:** Obstetrics and Gynecology, 1982

**Research Interests:** Medical Education, HPV

**Clinical Practice:** OB/Gyn

**Appointment:** Assistant Dean for Medical Education

## About

**Title:** Associate Professor

### Biography

Dr. Peterson's practice is limited to current students at the University of Virginia.


## Education

**Primary:** Tufts University, 1976

**Residency:** Obstetrics and Gynecology, University of Chicago

**Fellowships:** Psychiatry (Emotional Aspects of Women's Healthcare), Michael Reese Hospital and Medical Center

1215 Lee Street  
Charlottesville, VA 22903

 [Map & Directions](#)

[Redacted text block]



## Sean W Reed, MD

**Division:** General Family Medicine Appointment

**Department:** Family Medicine

Call 434.924.5348

**Primary Location:**

Family Medicine  
First Floor  
1221 Lee St.  
Charlottesville, VA 22903

 Directions

**Fax:** 434.982.0911



## Expertise

**Clinical Practice:** Family Medicine, Primary Care

## About

**Title:** Associate Professor

## Biography

I think of myself as a Massachusetts native although I lived most of my adult life in the Mid-Atlantic. With my political science degree in hand from Syracuse University, it was in Washington that I got my first "real" job as a government relations consultant (lobbyist). This was after spending nearly a year on Capitol Hill working for the Honorable John Joseph Moakley, a member of the House of Representatives.

Living in D.C should be a part of everyone's life plan for at least a couple of years. It is such an invigorating and special city. Six years in the consulting industry was enough to convince me that I wanted to return to the classroom to learn a trade. I represented many wonderful clients including Big Brothers Big Sisters of America, McGruff the Crime Dog and the New England Conservatory of Music, but it was our health clients that caught my interest. I completed my post-baccalaureate at Tuft's University and attended medical school at the University of Massachusetts.

During my second summer I married the love of my life, Karin and our family has grown to four with the births of our two daughters Ella and Isabel. My wife is a gifted educator who teaches second and third grade at Charlottesville Day school. If the sun is out it's a good bet that I'm either at the pool with my girls or out in the yard gardening.

I completed my residency in Family Medicine and a Faculty Development and Evidence-Based Medicine fellowship at UVA. I joined the faculty in March of 2008. I teach medical students during all four years of their education in addition to teaching our residents in Family Medicine. I am a member of the Board of Directors of the Virginia Academy of Family Physicians (VAFP) and am active in health policy initiatives at both the state and federal level. I provide primary care to my adult and pediatric patients as well as gynecologic and obstetrical care to the women in my practice. I particularly enjoy and am drawn to the humanistic side of medicine and strive to meet patients where they are in life. I perform a wide range of office-based procedures including skin excisions and joint injections.

## Awards


- 2015-2018 Best Doctors in America® List

## Education

Primary: University of Massachusetts Medical School, 2004

Residency: Family Medicine, University of Virginia Health System

1215 Lee Street  
Charlottesville, VA 22903

 [Map & Directions](#)

[REDACTED]

[REDACTED]

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[REDACTED]

[REDACTED]

**Professionalism Issue**

- Kieran Bhattacharya (Densmore) concern card for professionalism
  - From the reporter: "For a AMWA session, we held a panel on micro aggression. I and 2 other faculty members were invited guests. This student asked a series of questions that were quite antagonistic toward the panel. He pressed on and stated one faculty member was being contradictory. His level of frustration/anger seemed to escalate until another faculty member defused the situation by calling on another student for questions. I am shocked that a med student would show so little respect toward faculty members. It worries me how he will do on wards."
  - One prior concern card (attendance of mandatory activity)

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



# UNIVERSITY of VIRGINIA

SCHOOL OF MEDICINE  
*Academic Standards and Achievement Committee*

November 15, 2018


Kieran Bhattacharya  
SMD 2021

Dear Mr. Bhattacharya:

The Academic Standards and Achievement Committee has received notice of a concern about your behavior at a recent AMWA panel. It was thought to be unnecessarily antagonistic and disrespectful. Certainly, people may have different opinions on various issues, but they need to express them in appropriate ways.

It is always important in medicine to show mutual respect to all: colleagues, other staff, and patients and their families. We would suggest that you consider getting counseling in order to work on your skills of being able to express yourself appropriately.

Sincerely,

  
Jim B. Tucker, M.D.  
Chair, Academic Standards and Achievement Committee

CC: John Densmore, M.D., College Dean  
Katherine Yates, Registrar

35.B.

**Yates, Katherine M \*HS**

---

**From:** Tucker, Jim \*HS  
**Sent:** Thursday, November 15, 2018 10:36 AM  
**To:** Bhattacharya, Kieran R \*HS  
**Cc:** Densmore, John J \*HS (MD-Internal Medicine); Yates, Katherine M \*HS  
**Subject:** ASAC Letter  
**Attachments:** ASAC Letter.pdf

Dear Mr. Bhattacharya,

Please see the attached letter from the Academic Standards and Achievement Committee.

With best regards,

Jim B. Tucker, M.D.  
Chair, Academic Standards and Achievement Committee



[Redacted]

[Redacted]

[Redacted]

[Redacted]

From: Bhattacharya, Kieran R \*HS  
Sent: Tuesday, November 27, 2018 5:00 AM  
To: Densmore, John J \*HS (MD-Internal Medicine)  
Subject: Re:

How can it be legal to mandate psychiatric evaluations to continue my education?

"Public colleges responding to clearly protected expressions by prescribing mandatory counseling or psychological evaluation violates both students' rights to free speech and private conscience." - Kelly Sarabyn, FIRE (Foundation for Individual Rights in Education)

From: Densmore, John J \*HS (MD-Internal Medicine)  
Sent: Monday, November 26, 2018 5:45 PM  
To: Bhattacharya, Kieran R \*HS  
Subject:

Hi Kieran,  
I hope you're doing well. We were notified by the Dean of Students Office that you were heading back to Charlottesville. You will need to be seen by CAPS before you can return to classes. Let me know if you have questions.

Best regards,  
JJD

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]



## John J. Densmore, MD

Division: Hematology/Oncology

Department: Medicine

Call 434.924.9333

### Primary Location:

Emily Couric Clinical Cancer Center  
1240 Lee St.  
Charlottesville, VA 22903

 Directions

Fax: 434.244.7526

## Expertise

**ABMS Certification:** Internal Medicine; Hematology; Medical Oncology

**Research Interests:** Malignant hematology (lymphoma, myeloma, leukemia)

**Clinical Practice:** Acute Lymphoblastic Leukemia, Aplastic anemia, Chronic Lymphocytic Leukemia, Non-Hodgkin Lymphoma, Chronic Myelogenous Leukemia, Immune thrombocytopenic purpura (ITP), Hodgkin Lymphoma, Multiple Myeloma, Myelodysplastic Syndrome (MDS), Polycythemia vera, Leukemia, Lymphoma, Blood Disorders, Blood Cancers, Waldenstrom Macroglobulinemia

**Appointment:** Associate Dean for Admissions & Student Affairs - UVa School of Medicine

## About

**Title:** Associate Professor

### Biography

John Densmore, MD, is an associate professor of internal medicine at UVA.

After earning his undergraduate degree in physiology from Cornell University, Dr. Densmore came to UVA for medical school and never left. He earned a PhD in biophysics along with his MD and completed a residency in internal medicine. He then did a fellowship in hematology/oncology and joined the faculty in 2001. In addition to his clinical and teaching work, Dr. Densmore is the Associate Dean for Admissions and Student Affairs at the School of Medicine.

### Awards

- 2012-2018 Best Doctors in America® List

## Education

**Primary:** University of Virginia, 1995

**Residency:** Internal Medicine, University of Virginia

**Fellowships:** Hematology/Oncology, University of Virginia

## Media

**Publications:** View all publications on PubMed



FIRE's mission is to defend and sustain the individual rights of students and faculty members at America's colleges and universities. These rights include freedom of speech, freedom of association, due process, legal equality, religious liberty, and sanctity of conscience—the essential qualities of liberty. FIRE educates students, faculty, alumni, trustees, and the public about the threats to these rights on our campuses, and provides the means to preserve them.

FIRE was founded in 1999 by University of Pennsylvania professor Alan Charles Kors and Boston civil liberties attorney Harvey Silverglate after the overwhelming response to their 1998 book *The Shadow University: The Betrayal Of Liberty On America's Campuses*.

## **FIRE Issues**

### **Why is free speech important on campus?**

Freedom of speech is a fundamental American freedom and a human right, and there's no place that this right should be more valued and protected than America's colleges and universities. A university exists to educate students and advance the frontiers of human knowledge, and does so by acting as a "marketplace of ideas" where ideas compete. The intellectual vitality of a university depends on this competition—something that cannot happen properly when students or faculty members fear punishment for expressing views that might be unpopular with the public at large or disfavored by university administrators.

Nevertheless, freedom of speech is under continuous threat at many of America's campuses, pushed aside in favor of politics, comfort, or simply a desire to avoid controversy. As a result, speech codes dictating what may or may not be said, "free speech zones" confining free speech to tiny areas of campus, and administrative attempts to punish or repress speech on a case-by-case basis are common today in academia.

### **What is the First Amendment?**

The First Amendment to the United States Constitution is the part of the Bill of Rights that expressly prohibits the United States Congress from making laws "respecting an establishment of religion," prohibiting the free exercise of religion, infringing freedom of speech, infringing freedom of the press, limiting the right to peaceably assemble, or limiting the right to petition the government for a redress of grievances. The protections of the First Amendment are extended to state governments and public university campuses by the Fourteenth Amendment.

### **What does FIRE do?**

FIRE effectively and decisively defends the fundamental rights of tens of thousands of students and faculty members on our nation's campuses while simultaneously reaching millions on and off campus through education and outreach. In case after case, FIRE brings about favorable resolutions not only for those individuals facing rights violations, but also for the millions of other students affected by the culture of censorship within our institutions of higher education. In addition to our defense of specific individuals and groups, FIRE works across the nation and in all forms of media to empower campus activists, reform restrictive policies, and inform the public about the state of rights on our campuses.

### **What is religious liberty?**

Religious liberty is the right to follow the faith of your choice—or to follow no faith at all. Religious liberty is a cornerstone of our nation and is the very first freedom guaranteed to Americans by the Bill of Rights. Yet on many college and university campuses, the right to associate on the basis of religious belief and even the right to express those beliefs is under attack. Under the guise of "nondiscrimination" policies, religious groups are often told that they may not choose the membership or leadership of their groups using religious criteria. Other students who merely express religious beliefs in public are condemned and even punished for "hate speech" or "intolerance." FIRE's cases dealing with religious liberty display our commitment to defending America's religious pluralism by protecting students' rights to express their views and to associate around shared beliefs.

## What is due process?

The right to due process refers to the idea that governmental authorities must provide fair, unbiased, and equitable procedures when determining a person's guilt or innocence. The same principle applies to judicial hearings on college campuses; if those campuses care about the justice and accuracy of their findings, they must provide fair and consistent procedures for the accuser and the accused.

History has taught that the rights of all Americans can be secured only through the establishment of fair procedures and with a consciousness that all are equal in the eyes of the law. Yet on many campuses, the accused face "kangaroo courts" that lack fair procedures, in which the political viewpoint or institutional interests of the "judges" greatly affect the outcomes of trials. The accused are often charged with no specific offense, given no right to face their accusers, and sentenced with no regard for fairness or consistency. As a result, a generation of students is being taught the wrong lessons about justice—and facing the ruinous consequences for their personal, academic, and professional lives. Students must come to know that justice means more than merely the enforcement of the will of the powerful and the suppression of the views of the powerless.

## What is freedom of conscience?

Freedom of conscience means the right to be free to think and believe as you will without the imposition of official coercive power over those beliefs.

Liberty cannot exist when people are forced to conform their thoughts and expression to an official viewpoint. Differences of opinion are the natural byproducts of a vibrant, free society. At many of our nation's colleges and universities, however, students are expected to share a single viewpoint on hotly debated matters like the meaning and significance of diversity, the definition of social justice, and the impermissibility of "hate speech." Mandatory "diversity training," in which students are instructed in an officially-approved ideology, is common. Some institutions have enacted policies that require students to speak and even share approved attitudes on these matters or face disciplinary charges.

## More Information

For more information, please see FIRE's [Frequently Asked Questions](#).

# Colleges, Mandatory Counseling, and the Right of Private Conscience

by [Kelly Sarabyn](#)

December 31, 2007

The Virginia Tech tragedy earlier this year, in which student Seung-Hui Cho killed thirty-three people, ignited many policy debates. One of those debates focused on the college's responsibility for the mental health of its students. Prior to Mr. Cho's mass shooting, various Tech officials knew that Mr. Cho had exhibited a series of behaviors indicating the possibility of mental illness. Mr. Cho had persisted in unwanted contact of women, expressed suicidal thoughts, took photographs of women's legs in class without their knowledge, and written angry, disturbing, and violent stories. The combination of these red flags and the scale of the tragedy caused some commentators to call for colleges to exercise greater control over their students' mental health. Seven years ago, a similar debate rose to national prominence when M.I.T. student Elizabeth Shin's parents sued M.I.T. for failing to prevent Ms. Shin's dorm room suicide. A *New York Times* article entitled, "Who's Responsible for Elizabeth Shin?" wondered if M.I.T. should have taken greater responsibility for monitoring Ms. Shin's mental health.

While colleges taking greater responsibility for their students' mental health admirably aims to prevent student violence, such policies need careful tailoring to avoid violating students' First Amendment rights. At Virginia Tech, Mr. Cho's disturbing but protected creative writings were part of a larger pattern of behavior that may have legitimated the school stepping in. In the wake of the tragedy that followed, however, some colleges have become too quick to order students to attend counseling or undergo a psychological evaluation.

Public colleges responding to clearly protected expressions by prescribing mandatory counseling or psychological evaluation violates both students' rights to free speech and private conscience. Unlike a suspension from school, which offends a student's right to free speech, ordering psychological counseling for protected speech compounds the offense to the Constitution by violating both a student's right to free speech and his right to private conscience.

The goal of psychological counseling is to change the way a person thinks and sees the world. As a result, mandatory counseling prescribed for protected speech is invasive, cutting to the core of what Justice Robert Jackson described aptly as a "fixed star in our constitutional constellation." Responding to a primary school's attempt to force its students to salute the American flag, which violated the students' religious beliefs, Justice Jackson wrote, "No official, high or petty, can prescribe what shall be orthodox in politics, nationalism, religion or other matters of opinion or force citizens to confess by word or act their faith therein."

When state colleges require counseling against a person's will *merely* for saying or believing the "wrong" thing, it becomes state-run thought reform. The state labels certain clearly protected expressions "sick," and deploys counselors to modify the individual's beliefs and verify that the individual has discarded the "sick" beliefs. Schools may permissibly respond to speech that crosses the line from a protected expression of belief to a genuine threat, as well as to disturbing behaviors that may accompany protected speech—like yelling in the middle of a class. They may also respond to disturbing patterns of expression by talking with the student, and by offering the student counseling services. But this is not what FIRE has seen occur on college campuses in the wake of Virginia Tech. Rather, we have seen students sent to mandatory counseling after their school labeled them a "threat" for engaging in protected speech that did not even remotely rise to such a level. Right after the Virginia Tech tragedy, for example, Hamline University ordered graduate student Troy Scheffler to undergo psychological counseling when Mr. Scheffler sent two emails expressing his belief that Tech's ban on concealed weapons may have contributed to the number of deaths. The point of counseling in this context is presumably for Mr.

Scheffler to learn the “offensiveness” and “inappropriateness” of expressing his particular beliefs. In another egregious case, Valdosta state ordered student T. Hayden Barnes to undergo mental counseling after he protested the school’s decision to build a parking garage by posting a collage on Facebook.

Ordering mandatory counseling for what is clearly protected speech violates the same right as the extensive thought reform program dismantled this fall at the University of Delaware. Delaware’s mandatory one-on-one personal interviews, compelled speech, and explicit re-education goals sought to compel students to discard certain “incorrect” beliefs, and adopt others. Like Hamline, Delaware took it upon itself to dictate and correct students’ mental lives. Whether such invasions are motivated by a desire to correct a problem student’s disturbing speech, or every student’s biased worldview, they are an offense to the Constitution.

Prescribing psychological counseling for protected expression instead of expelling, condemning or suspending the student can obfuscate the perniciousness of the action. Colleges may stress their concern for the student, claiming that they are only trying to help—not punish—him or her. No matter how sincere and benign this motivation, however, it is not a public school’s job to make sure its students have “healthy” beliefs. FIRE will be keeping a close eye on this trend in the year to come.

Schools: [Valdosta State University](#)

Cases: [Valdosta State University: Student Expelled for Peacefully Protesting Parking Garages](#)



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[Redacted]

From: Canterbury, R. J. \*HS  
Sent: Tuesday, November 27, 2018 11:48 AM  
To: Bhattacharya, Kieran R \*HS  
Subject: Required process to attend class

Dear Kieran,

I have heard from Dr. Densmore that you have been calling him about your desire to return to class today. You are not cleared to return to class until you have been evaluated by CAPS at the Student Health Service. Do not attend your CPD group today. Make an appointment with CAPS to initiate the medical clearance process.

Best regards,  
R. J. Canterbury, M.D., M.S., DLFAPA  
Senior Associate Dean for Education  
Wilford W. Spradlin Professor  
UVA School of Medicine  
Box 800005  
Charlottesville, VA 22908-0005  
Phone: (434) 243-2522  
Fax: (434) 924-5986  
<http://www.medicine.virginia.edu>

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[Redacted]

Randolph Canterbury



### Randolph Canterbury

Senior Associate Dean for Education at University of Virginia School of Medicine  
Charlottesville, Virginia Area · 343 connections

 University of Virginia Health System

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Randolph Canterbury

## Experience

**Senior Associate Dean for Education**

University of Virginia Health System

2008 – Present · 11 years

[Redacted]

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[Redacted]

[Redacted text]

## Randolph Canterbury, MD

< return to list



**Randolph J. Canterbury, M.D.**

Professor of Psychiatric Medicine and Internal Medicine

### **Department of Psychiatry and Neurobehavioral Sciences**

Division of Outpatient Psychiatry

### Contact

**Phone:** (434) 243-5719

**Fax:** (434) 982-1853

**Email:** rjc9s@virginia.edu

**Department Web Site:** <http://www.healthsystem.virginia.edu/internet/psychiatric/>

### Education

#### **M.D. Degree:**



**Residency:**

Psychiatry, University of Virginia

Internal Medicine, University of Virginia

**Certification:**

American Board of Internal Medicine, 1983

American Board of Psychiatry and Neurology, 1985

Addiction Medicine, 1991

**Interests**

**Clinical Interests:**

Substance abuse treatment and psychopharmacology, panic disorder, medical interviewing

**Research Interests:**

Substance abuse, epidemiology of substance abuse and AIDS, health services research

**Patients Most Frequently Seen:** Panic disorder, depression

200 Jeanette Lancaster Way  
Charlottesville, VA 22903

[Map and directions](#)

**SCHOOL OF MEDICINE**

---

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[Faculty](#)



## Randolph J Canterbury, MD

**Division:** Outpatient Psychiatry

**Department:** Psychiatry and Neurobehavioral Sciences

Call 434.924.2241

**Primary Location:**

PO Box 800623

Charlottesville, VA 22908-0623

 [Directions](#)

**Fax:** 434.982.1853

### Expertise

**ABMS Certification:** American Board of Internal Medicine, 1983; American Board of Psychiatry and Neurology, 1985; Addiction Medicine, 1991

**Research Interests:** Substance abuse, epidemiology of substance abuse and AIDS, health services research

**Clinical Practice:** Panic Disorder, Depression, Drug Abuse and Drug Addiction, Psychiatry Services - Adult

## About

**Title:** Professor

### Awards


- 2015 Bedside Manner Award, Our Health Magazine; Second place

## Education

**Primary:** West Virginia University, 1979

**Residency:** Psychiatry, University of Virginia; Internal Medicine, University of Virginia

1215 Lee Street  
Charlottesville, VA 22903

 [Map & Directions](#)

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## COMMUNITY

**To:** Yates, Katherine M \*HS <KAMSVD@hscmail.mcc.virginia.edu>  
**Subject:** Re: ASAC meeting invite



**From:** Yates, Katherine M \*HS  
**Sent:** Wednesday, November 28, 2018 1:00 PM  
**To:** Bhattacharya, Kieran R \*HS  
**Cc:** Tucker, Jim \*HS; Densmore, John J \*HS (MD-Internal Medicine)  
**Subject:** ASAC meeting invite

Hello Kieran,

The Academic Standards and Achievement Committee will be meeting today to discuss your current enrollment status. You are invited to attend to share your insights with the committee. The meeting will take place at 5:00 in the Claude Moore Medical Education Building, in room G 165. Please arrive at 5:00. The meeting has some business to attend to before they have questions for you, so we will have someone waiting to let you know when they are ready for you.

Please reply and let us know if you will be in attendance.

Thank you,

Katherine M. Yates, M.Ed.  
Registrar  
School of Medicine  
University of Virginia  
PO Box 800739  
Charlottesville, VA 22908  
434-924-5200



[Redacted]

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[Redacted]

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From: Bhattacharya, Kieran R \*HS  
Sent: Wednesday, November 28, 2018 1:28 PM  
To: Yates, Katherine M \*HS  
Subject: Re: ASAC meeting invite

?Who exactly will be present? Do you normally just give students 3 hours to prepare after indirectly threatening to kick them from medical school? Why exactly is my enrollment status up for discussion?  
[Quoted text hidden]

**Yates, Katherine M \*HS**

---

**From:** Bhattacharya, Kieran R \*HS  
**Sent:** Wednesday, November 28, 2018 1:52 PM  
**To:** Yates, Katherine M \*HS  
**Subject:** Re: ASAC meeting invite

I will be in attendance.

---

**From:** Yates, Katherine M \*HS  
**Sent:** Wednesday, November 28, 2018 1:37 PM  
**To:** Bhattacharya, Kieran R \*HS  
**Subject:** RE: ASAC meeting invite

Hello,

Here is the information about the committee's make up, policies, and procedures:

- <https://med.virginia.edu/student-affairs/policies/academic-standards-and-achievement-committee-operating-procedures/>
- <https://med.virginia.edu/student-affairs/policies/academic-standards-achievement-policy/>
- <https://med.virginia.edu/school-administration/standing-committees/academic-standards-and-achievement-committee/>

Regards,

Katherine

[Redacted]

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46.B

Audio recording of ~~ASAC~~ ASAC  
disciplinary hearing against Plaintiff  
on 28 November, ~~2018~~ 2018



# UNIVERSITY of VIRGINIA

SCHOOL OF MEDICINE

## MINUTES

### Academic Standards & Achievement Committee

MEB G 165

Wednesday, November 28, 2018

The meeting was called to order at 4:58 p.m. Present were Drs. Jim Tucker (chair), Roger Abounader, Brian Behm, Robert Bloodgood, Donna Chen, Sharon Diamond-Myrsten, Nicholas Intagliata, Nora Kern, Wilson Miller, Barnett Nathan, Catherine Shaffrey, as well as [REDACTED] (student)

Non-voting members: John Densmore, Megan Bray, Lesley Thomas, and Katherine Yates.

Guests: Kieran Bhattacharya, Lynne Fleming and Chris Peterson.

Absent: Drs. Stephen Culp, Pam Herrington, and Angelique Redus-McCoy as well as Brielle Gerry (student).

On leave from committee: Dr. Katheryn Frazier.

#### Professionalism Issues

The committee convened to discuss concerning behaviors exhibited by Kieran Bhattacharya (Densmore) over the past weeks after members of the Technical Standards Committee determined that the concerns were best addressed by the ASAC. The ASAC convened an emergency meeting on Wednesday November 28. Kieran Bhattacharya was invited to attend the meeting to discuss his enrollment status and did attend the meeting..

The student was given the opportunity to address concerns about his behavior. He asked questions of members of the Committee and responded to questions asked by the Committee.

The Committee reviewed the list of technical standards that are acknowledged annually by the students especially the Emotional, Attitudinal and Behavioral Skills.

Because the student's behavior demonstrated his inability to meet several of those standards. Dr. Nathan made a motion to suspend Kieran Bhattacharya (Densmore) from the School of Medicine, effective immediately, with the option to petition to return in August of 2019. Dr. Behm seconded the motion. The committee voted unanimously to accept the motion. Nora Kern did not vote on the matter, as personal business required her to leave before the vote was executed.

A letter will be sent to Kieran Bhattacharya's email, informing him of the decision and explaining the appeals process.

The meeting was adjourned at 6:18 pm.

Minutes respectfully submitted by:

Katherine Yates 11/29/18

PO BOX 800739 • CHARLOTTESVILLE, VA 22908-0739 • PHONE (434) 924-5579 • FAX (434) 982-4073  
<http://www.med-ed.virginia.edu/>

# Roger Abounader



Roger Abounader

## Education

PhD, University of Heidelberg, Germany

MD, University of Heidelberg, Germany

BS, American University of Beirut, Lebanon

## Primary Appointment

Professor, Microbiology, Immunology, and Cancer Biology

## Contact

**Phone:** 434-982-6634

**Email:** [ra6u@virginia.edu](mailto:ra6u@virginia.edu) (<mailto:ra6u@virginia.edu>)

## Research Interest(s)

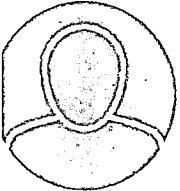
Basic and translational brain tumor research

## Research Description

Our research focuses on understanding the molecular basis of brain tumor and glioblastoma development and growth and on using the acquired knowledge to identify new therapeutic targets and develop new therapeutic approaches. Specifically, the following projects are ongoing in the lab at this time:

### 1. MicroRNAs in brain tumors:

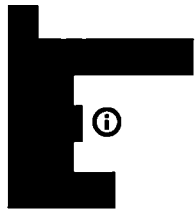
We are studying the expressions, mechanisms of action and functions of several microRNAs that are predicted to target or mediate the effects of important oncogenic molecules in brain tumors. We are also using novel global microRNA target screening approaches (PAR-CLIP and CLASH) to uncover the compendium of microRNA targets in brain tumors. The ultimate goal is to understand the role of microRNAs in brain tumor development and growth and to identify master regulatory microRNAs that can be used or targeted for therapy with novel molecular delivery approaches.



Robert Bloodgood  
University of Virginia | UVa · Department of Cell Biology  
PhD, University of Colorado



About



Research



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View

Redacted content with a logo icon



## Sharon Diamond-Myrsten, MD

**Division:** General Family Medicine Appointment

**Department:** Family Medicine

**Primary Location:**

PO Box 800729  
Charlottesville, VA 22908

 [Directions](#)

**Secondary Locations:** Family Medicine, Family Medicine and Specialty Care Crozet

### Expertise

**ABMS Certification:** Family Medicine

**Clinical Practice:** Family Medicine, Primary Care

## About


**Title:** Assistant Professor

## Education

**Primary:** Eastern Virginia Medical School

**Residency:** Lynchburg Family Medicine

1215 Lee Street  
Charlottesville, VA 22903

 [Map & Directions](#)

[Redacted text block containing multiple lines of obscured information]



[Redacted]

[Redacted]

[Redacted]

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From: Tucker, Jim \*HS  
Sent: Thursday, November 29, 2018 5:30 PM  
To: Bhattacharya, Kieran R \*HS  
Cc: Densmore, John J \*HS (MD-Internal Medicine); Yates, Katherine M \*HS  
Subject: ASAC Letter

Dear Mr. Bhattacharya,

See the attached letter from the Academic Standards and Achievement Committee.

Please know that Drs. Densmore, Reed, and Keeley are available for support. Also, in response to your question about ID access, suspension involves a deactivation of your ID per standard university procedure, but you can make an appointment should you need to meet with your college dean.

[Quoted text hidden]

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 **ASAC Letter.pdf**  
153K



UNIVERSITY OF VIRGINIA

SCHOOL OF MEDICINE  
Academic Standards and Achievement Committee

November 29, 2018

Kieran Bhattacharya  
SMD 2021

Dear Mr. Bhattacharya:

The Academic Standards and Achievement Committee ("ASAC") convened on November 28, 2018 to review concerns that your recent behavior in various settings demonstrated a failure to comply with the School of Medicine's Technical Standards. Members of the Technical Standards Committee determined that the concerns about your recent behavior should be addressed by the Academic Standards and Achievement Committee. The ASAC decided that the nature of the concerns necessitated the calling of an emergency meeting. You were notified of that meeting on November 28, 2018 and provided an opportunity to be heard and to respond to the concerns about your recent behaviors. You attended the meeting, asked and answered questions and presented information.

The Academic Standards and Achievement Committee has determined that your aggressive and inappropriate interactions in multiple situations, including in public settings, during a speaker's lecture, with your Dean, and during the committee meeting yesterday, constitute a violation of the School of Medicine's Technical Standards that are found at: <https://med.virginia.edu/student-affairs/policies/technical-standards/>

Those Standards, in relevant part and as related to professionalism, state that each student is responsible for: Demonstrating self-awareness and self-analysis of one's emotional state and reactions; Modulating affect under adverse and stressful conditions and fatigue; Establishing effective working relationships with faculty, other professionals and students in a variety of environments; and Communicating in a non-judgmental way with persons whose beliefs and understandings differ from one's own.

The committee has voted to suspend you from school, effective immediately. You may apply for readmission to return to class no earlier than August, 2019. A student suspended for academic, professionalism, or administrative reasons or a student who has academic or Technical Standards/professionalism deficiencies at the time of suspension must be reviewed and approved to return by ASAC. The committee would only approve your return if you are able to provide evidence that further violations of the Technical Standards are unlikely to occur.

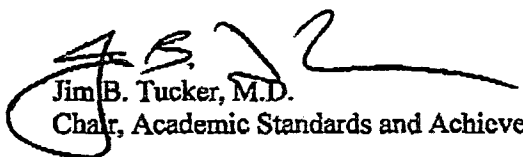


You may appeal your suspension, in accordance with the SOM's appeal procedures:

**Academic Appeals Process:**

- If ASAC requires a dismissal from the School of Medicine or repetition of an academic period, the notification to the student will provide the option of an appeal and a description of the appeals process. This option will not be granted to those students failing to pass Steps 1, 2 CK or 2 CS of the USMLE within three attempts. The student may formally request that the Associate Dean for Student Affairs appoint an ad hoc Appeals Committee to review the decision of ASAC. The student must file his/her appeal no later than 14 days from receipt of notification or lose the right to appeal.
- The three-person ad hoc Appeals Committee is drawn from a pool of 10 faculty members named by the Associate Dean for Student Affairs, none of whom are current members of ASAC. The student selects one member, the Senior Associate Dean for Education selects one member, and the Dean selects the third member (who chairs the ad hoc Appeals Committee). The Associate Dean for Student Affairs serves as staff liaison, ex officio, without vote.
- The student is permitted to inspect their entire medical school file, including any material upon which the decision of ASAC was based.
- The student is permitted to have counsel, to submit affidavits and exhibits and to summon witnesses at the Appeals Committee hearing. Legal counsel may be present to provide advice, but legal counsel will not be permitted to participate actively in presentation of testimony, examination/cross examination of witnesses or oral arguments.
- The Appeals Committee is to conduct a hearing as soon as possible (ordinarily within 14 days) and will uphold, modify or reverse the decision(s) of ASAC.
- The Appeals Committee will provide the student with all the evidence against him or her, including the academic grades and written evaluations, and will base its recommendations upon the evidence presented at the hearing.
- The Appeals Committee will send its decision, along with a written record of its proceedings, to the Dean of the School of Medicine.
- The decision of the Appeals Committee will be final.

Sincerely,

  
 Jim B. Tucker, M.D.  
 Chair, Academic Standards and Achievement Committee

CC: John Densmore, M.D., College Dean  
 Katherine Yates, Registrar

52.



**Kieran Bhattacharya**

Tue, Dec 4, 2018 at 11:15 AM

To: jjd2q@virginia.edu, mmg4z@virginia.edu, cmp8x@virginia.edu, sr5fb@virginia.edu

Hello,

My name is Kieran Bhattacharya, and I am having to email you all because my health system email was recently deleted. I would like to appeal my 1-year suspension and was hoping to talk to any of you within the next 10 days to initiate this process within the established deadline set forth by the UVA school of medicine.

Sincerely,  
Kieran Bhattacharya

52.B



[Redacted]

[Redacted]

Densmore, John J \*HS (MD-Internal Medicine) [Redacted]  
To: Kieran Bhattacharya [Redacted]

Tue, Dec 4, 2018 at 8:02 PM

Hi Kieran,

The appeals process has been started. We will have a list of 10 faculty in the next couple of days as described in your letter. You will choose one member, Dr. Canterbury will choose one and Dr. Wilkes will choose one. We are contacting faculty now and will let you know as soon as we have ten.

JJD

[Redacted]

----- Original Message -----

From: usmlereg@nbme.org [usmlereg@nbme.org]

Sent: 12/7/2018 3:10 PM

Subject: Eligibility to take USMLE - Case #00196375 [ ]

USMLE ID [redacted]  
Re: USMLE Step 1

Dear Kieran Ravi Bhattacharya:

The staff at U Virginia School of Medicine informed us that you are not currently enrolled. Official enrollment is an eligibility requirement for USMLE Step 1, Step 2 CK, and Step 2 CS. Because you are not eligible, we cancelled your registration for USMLE Step 1.

In light of your circumstances, I approved an exception to the USMLE fee policy. We will refund your registration fee minus a \$100 processing charge.

A credit in the amount of \$530 will be issued to the credit card used to pay for your exam. To confirm the credit card account used, access your Payment Receipt on NLES at <<http://examinee.nbme.org/interactive>> by selecting the Full Details link for your exam. Your Payment Receipt is available in the Associated Documents section of the screen.

Please allow up to four weeks for processing.

\*NOTE: If the credit card account was closed, please reply to this email immediately. Changing your refund method will require additional processing time.

Sincerely,  
Heather | Customer Operations Management | National Board of Medical Examiners | 3750 Market Street, Philadelphia, PA 19104  
(215) 590-9700 | [www.nbme.org](http://www.nbme.org) | [www.usmle.org](http://www.usmle.org)

UNIVERSITY  
of VIRGINIA  
 UNIVERSITY POLICE

January 2, 2019

Kieran Bhattacharya



Dear Mr. Bhattacharya:

As a follow up to my phone conversation with you on Sunday, December 30, 2018, please find attached to this letter a no trespass warning which has been issued to you by the University of Virginia Police Department at the University of Virginia.

Regards,

  
Melissa Fielding  
Police Captain

Enclosure (1)



54.



# UNIVERSITY OF VIRGINIA POLICE DEPARTMENT

## TRESPASS WARNING

OPS-006  
10/2018

IBR Number 2018-33244      Officer Melissa Fielding      Badge Number 3      Effective Date 01/02/2019

Location of Warning Verbal by phone followed by this written notice by certified mail.

### Recipient of Trespass Warning

Last Name Bhattacharya      First Name Kieran      Middle Name

DOB 6/20/1996      SSN      Sex M      Race

Address [REDACTED]      City [REDACTED]      State [REDACTED]      Zip [REDACTED]

Student       Faculty       Staff       No Affiliation

**This written form serves as notice to you that you are being warned for trespassing on the Grounds of the University of Virginia.**

You are not to enter the following University of Virginia facility/building:

**OR** \_\_\_\_\_

You are not to come on **any** property or facility on the Grounds of the University of Virginia **except** as a patient at the University of Virginia Medical Center.

**YOU MAY VISIT THE EMERGENCY DEPARTMENT OF THE UNIVERSITY OF VIRGINIA MEDICAL CENTER FOR A MEDICAL SCREENING EXAMINATION OF AN EMERGENCY MEDICAL CONDITION.**

**IF YOU ARE FOUND IN ANY AREA FROM WHICH YOU HAVE BEEN WARNED ABOVE, YOU WILL BE ARRESTED AND CHARGED WITH TRESPASSING AFTER HAVING BEEN WARNED AGAINST IT. VIRGINIA CODE § 18.2-119.**

This Trespass Warning  expires 4 years after the Effective Date; or  is effective until rescinded in writing.

The Grounds of the University of Virginia include all property owned and leased by the University of Virginia. If you have a question as to the status of a particular place, you may call the University Police Department at (434) 924-7166 for clarification and should do so BEFORE coming onto an area which may be owned or leased by the University of Virginia.

Signing this form does not constitute an admission of guilt to any offense nor does it give a promise to appear in a court of law or participate in any legal proceeding. It simply verifies that the signer understands the instructions in reference to trespassing on the Grounds of the University of Virginia.

Recipient Signature      Sent by certified mail      Date 01/02/2019

**Procedures to Appeal a Trespass Warning:**

The Trespass Warning must be appealed in writing to the Associate Vice President for Safety and Security within five (5) calendar days after the date the Trespass Warning is served.

Written appeals should be hand-delivered or mailed to:

Associate Vice President for Safety and Security  
PO Box 400214  
2304 Ivy Road  
Second Floor  
Charlottesville, VA 22903-44790

Written appeals also may be submitted by electronic mail to: **police@virginia.edu**

If the appeal is not delivered or postmarked within five (5) calendar days after the date the Trespass Warning is served, then the recipient of the Trespass Warning waives the opportunity to appeal.

Written appeals shall include:

1. Appellant's contact information, including address, telephone number, and e-mail address,
2. Date of the issuance of the Trespass Warning and the IBR Number located in the upper left-hand corner of the Trespass Warning,
3. The reason for the review request,
4. A complete and candid explanation for the conduct that precipitated the Trespass Warning,
5. The basis for the desire to be on University or Medical Center property, and
6. Any other information the appellant wished to be considered.

The Trespass Warning remains in effect while the appeal is being considered, unless the University of Virginia Police modifies or withdraws the Trespass Warning.

If the basis of the appeal is a need to be on Medical Center property for a scheduled medical procedure or appointment or to visit a registered patient at the Medical Center, the Associate Vice President shall consult with the Medical Center's Office of Patient Safety and Risk Management prior to finalizing a decision regarding upholding, modifying, or withdrawing the Trespass Warning.

The Associate Vice President shall issue the decision within twenty-one (21) calendar days of receipt of the written appeal. The Associate Vice President may uphold, modify, or withdraw the Trespass Warning. The decision of the Associate Vice President is final.

Trespass Warnings will automatically expire within four (4) years after the date the Trespass Warning was served, unless otherwise noted in the Trespass Warning.



[Redacted]

**Request for readmission for SMD22**

**Densmore, John J \*HS (MD-Internal Medicine)** <JJD2Q@hscmail.mcc.virginia.edu>  
To: Kieran Ravi <kieran0696@gmail.com>  
Cc: "Tucker, Jim \*HS" <JBT8N@hscmail.mcc.virginia.edu>

Fri, Jul 12, 2019 at 7:47 AM

Dear Kieran,

Thank you for your email. The School of Medicine is aware that a no trespass order was issued by the University Police Department (UPD) on January 2, 2019 prohibiting you from University Grounds for four years. We cannot address your request for readmission while a no trespass order is in effect. Should you have questions about that order, you will need to contact UPD directly.

Best regards,  
John Densmore

[Redacted]

[Redacted]

[Redacted]

[Redacted]





[HOME](#) / [CONFIDENTIALITY](#)

# Confidentiality

## INFORMATION FOR STUDENTS

Once you become 18 years old, as a student of the University of Virginia you have the right to privacy and confidentiality regarding your medical care.

Your medical records will be kept confidential and access to information about you will be limited to those legitimately involved in your care. Your medical records will be released only in cases of medical emergencies, in response to court-ordered subpoenas or to persons you specify with your written consent.

Please be sure to discuss this issue with your parents. Unless you give permission in writing or by telephone, we are not allowed to divulge information to anyone, including your parents, about your care.

400 Brandon Avenue  
P.O. Box 800760  
Charlottesville, VA 22908-0760  
Location

**PHONE:** 434-924-5362

**BUSINESS HOURS:** (434)-924-5362

**AFTER-HOURS:** (434) 297-4261

**FAX:** 434-982-3956

**EMAIL:** [studenthealth@virginia.edu](mailto:studenthealth@virginia.edu)