MINUTES
MEDICAL UNIVERSITY OF SOUTH CAROLINA
BOARD OF TRUSTEES MEETING
May 27, 2012

The Board of Trustees of the Medical University of South Carolina convened Thursday, May 17, 2012, with the following members present: Thomas L. Stephenson, Esquire, Chairman; Dr. James E. Wiseman, Jr., Vice Chairman; Dr. Stanley C. Baker, Jr.; Mr. William H. Bingham, Sr.; Dr. Cotesworth P. Fishburne, Jr.; Mr. William B. Hewitt; Dr. Harold W. Jablon; Dr. Donald R. Johnson II; Dr. E. Conyers O'Bryan, Jr.; Dr. Thomas C. Rowland, Jr.; Mr. Charles W. Schulze; Dr. Charles B. Thomas, Jr. Absent: The Honorable Robin M. Tallon

The following administrative officials were present: Dr. Raymond S. Greenberg, President; Dr. Mark Sothmann, Vice President for Academic Affairs and Provost; Dr. Etta Pisano, Vice President for Medical Affairs, and Dean, College of Medicine; Ms. Lisa Montgomery, Executive Vice President for Finance and Operations; Mr. Stuart Smith, Vice President for Clinical Operations and Executive Director, MUHA; Dr. Frank Clark, Vice President for Information Technology and CIO; Mr. Jim Fisher, Vice President for Development.

The following deans were present: Dr. Jack Sanders, College of Dental Medicine; Dr. Lisa Saladin, College of Health Professions; Dr. Philip Hall, College of Pharmacy; Dr. Gail Stuart, College of Nursing; Dr. Perry Halushka, College of Graduate Studies; Dr. Joe DiPiro, Executive Dean, SCCP.

Item 1. Call to Order.

There being a quorum present, Chairman Stephenson called the meeting to order.

Item 2. Secretary to Report Date of Next Meeting.

The date of the next regularly scheduled meeting is Friday, August 10, 2012.

Item 3. Approval of Minutes of the Regular Meeting of the Medical University of South Carolina Board of Trustees of April 13, 2012.

Board Action: It was moved that the Minutes be approved. The motion was seconded, voted on and unanimously carried.

RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT.

OLD BUSINESS: None.

NEW BUSINESS:


Dr. Greenberg distributed a copy of his activities since the last Board meeting which has been a busy time with fundraising and legislative activities. A final decision has not been made about whether to move graduation to the Citadel location. Regardless, everyone will gather in Colcock Hall in the morning and travel to the Citadel via buses if the weather requires us to make the move.

Recommendations of Administration: That the report be received as information.
Board Action: Received as information.

Item 5. Other Business. None.

RESEARCH AND INSTITUTIONAL ADVANCEMENT COMMITTEE. CHAIRMAN: DR. COTESWORTH P. FISHBURNE, JR.

OLD BUSINESS: None.

NEW BUSINESS


Statement: Dr. Lanier discussed research funding which year-to-date is about $13 million behind this time last year. This is primarily due to the lack of ARRA stimulus funding. Research funding numbers are at about $170 million which is $14 million ahead of pre-stimulus funds. He reviewed several recent outstanding grants that have been received. There will be a new award given to faculty this year in recognition of Peggy Schachte. It is the Peggy Schachte Research Mentoring Award which was endowed by Jerry Reves in the COM. With the award comes a $1000 check to the faculty member who has successfully mentored junior faculty in obtaining research support from private and public organizations or government agencies.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.


Statement: Mr. Jim Fisher reported that through April 25th fundraising was approximately $43 million which is about 20% behind this time last year. The good news is there are about $25 million in verbal commitments that are anticipated to close in the next six weeks. We are approaching final discussion with a donor of an eight figure gift to the COP and are very optimistic this commitment will be closed during the next six months. We are working on engaging a consultant to conduct a feasibility study regarding the philanthropy we feel we can raise for the new Women’s and Children’s Hospital. He reminded everyone that the Golden Grads luncheon will be held at noon at the Country Club of Charleston.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.


Statement: Mr. Tom Anderson said the good news is that the Foundation’s asset base is greater than $413 million which is another record at March 31st. He attributes this to philanthropy and also investment funds even though investment funds
continue to be a challenge. The MUSC Foundation Board had its meeting May 5th and approved funding the financing of a data center. The Foundation is working with the University to determine the cost of the project but the intent is to finance the University's cost.

Recommendation of Administration: That the report be received as information.

Board Action: Received as information.

**Item 9. General Report of the Executive Director of the MUSC Foundation for Research Development.**

**Statement:** In Mr. Robert Donato’s absence, Dr. Lanier stated that Mr. Donato is serving as Interim Executive Director and has been engaging with everyone on the University side. He has ramped up disclosures this past year with a record 60 invention disclosures and he is working on keeping that record going with the departure of Mr. Hood.

Recommendation of Administration: That the report be received as information.

Board Action: Received as information.

**Item 10. Other Business.**

Dr. Steve Lanier introduced Wando Hutto at the new Assistant Director of the Office of Research Development.

**EDUCATION, FACULTY AND STUDENT AFFAIRS COMMITTEE. CHAIRMAN: DR. E. CONYERS O'BRYAN.**

**OLD BUSINESS:** None.

**NEW BUSINESS:**

**Item 11. General Report of the Vice President for Academic Affairs and Provost.**

**Statement:** Dr. Sothmann reported the University will graduate 513 students tomorrow: 68 bachelors, 63 masters, 363 professional doctorates and 19 PhDs. He congratulated all the colleges and staff on their hard work.

Recommendation of Administration: That the reports be received as information.

Board Action: Report received as information.
Item 12. **Report of the VP for Medical Affairs and Dean, College of Medicine.**

**Statement:** Dean Pisano provided a report on graduating students. The College is on target to be ready for the January 2013 LCME reaccreditation site visit. She was pleased to also report a very successful residency match and that 30% are staying in the state for their residencies. She reviewed the specialties as well as the locations they matched into. Data from AHEC shows that of 402 COM Family Medicine graduates, 145 are still actively practicing in South Carolina. If you look at the national data about MUSC graduates as compared to all other medical schools in the nation, MUSC is at the 90th percentile practicing in underserved areas; 68th percentile for schools that placed graduates in rural areas; 53rd for practicing in-state and 51st for practicing in primary care.

She emphasized what a large undertaking the EPIC project is and there are many people working to make the transition go smoothly. Despite the fact that fewer patients are being seen during the transition, the project should pay dividends in our ability to handle patients in the long run.

**Recommendation of Administration:** That the reports be received as information.

**Board Action:** Report received as information.

Item 13. **Other Committee Business.**

**Additional Academic Fees in the College of Graduate Studies.**

**Statement:** Dr. O’Bryan presented a request from the Dean of the College of Graduate Studies for approval of a histology fee of $1,221 In-State and $3,246 Out-of-State (required by the University of South Carolina) and an Anatomy fee of $200 (Required by MUSC), effective May 17, 2012. These fees are for the Certificate in the Biomedical Sciences.

**Board Action:** A motion was made, seconded and unanimously voted to approve the fees as requested.

Item 14. **Conferring of Degrees.**

**Statement:** Approval was requested to confer degrees upon those candidates who, pending successful completion of all requirements for their degrees by the conclusion of the spring semester, have the recommendation of their college dean and faculty.

**Recommendation of Administration:** That the conferring of degrees be approved.

**Board Action:** A motion was made seconded and unanimously voted to approve the conferring of degrees.
Item 15. Faculty Appointments.

Statement: At the request of the Dean of the College of Medicine, administration presents for approval the following faculty appointments:

George W. Arana, M.D. as Clinical professor in the Department of Psychiatry and Behavioral Sciences effective March 2, 2012.

Ki Young Chung, M.D. as Clinical Associate Professor in the Department of Medicine, Division of Hematology/Oncology retroactive August 1, 2011.

Michael B. Lilly, M.D. as Professor (Academic Clinical track) in the Department of Medicine, Division of Hematology/Oncology effective January 1, 2012.

William A. Morton, Jr., PharmD, as Professor Emeritus in the Department of Psychiatry and Behavioral Sciences effective April 1, 2012.

Carolyn T. Spencer, M.D. to Associate Professor (Clinician Educator track) in the Department of Pediatrics, Division of Cardiology effective May 21, 2012.

David J. Walsh, M.D. as Clinical Professor, in the Department of Neurosciences, Division of Neurology, effective April 1, 2012

Recommendation of Administration: That these faculty appointments be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the faculty appointments.

Item 16. Changes in Faculty Status.

Statement: At the request of the Deans of the colleges of Nursing and College of Medicine, administration presents for approval the following faculty change in status:

College of Nursing
from Professor to Professor Emeritus

Sally Stroud, Ed.D., APRN, BC, for change in faculty status from Professor to Professor Emeritus, effective June 1, 2012

College of Medicine
from Clinical Professor to Clinical Professor Emeritus

James A. Majeski, M.D., PH.D. for change in faculty status from Clinical Professor to Clinical Professor Emeritus in the Department of Surgery retroactive to July 1, 2011
College of Medicine
from Professor to Professor Emeritus

Julius Sagel, M.D. for change in faculty status from Professor to Professor Emeritus, effective July 1, 2012

Colleges of Medicine and Dental Medicine
from Professor to Professor Emeritus

Robert P. Thompson, Ph.D. from professor to Professor Emeritus in the Department of Regenerative Medicine, effective April 1, 2012

Colleges of Health Professions
from Professor to Professor Emerita

Andrea W. White, Ph.D. from professor to Professor Emerita in the Department of Healthcare Leadership and Management, effective August 1, 2012

Recommendation of Administration: That the changes in faculty status be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the changes in faculty status.

Item 17. Revisions to the University Conflict of Interest Policy.

Statement: Revisions to the University Conflict of Interest Policy were presented for approval.

Recommendation of Administration: That the revisions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the revisions to the Conflict of Interest Policy.

Item 18. Institutional Conflict of Interest Policy.

Statement: The Institutional Conflict of Interest Policy was presented for approval.

Recommendation of Administration: That the Policy be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the Institutional Conflict of Interest Policy.

FINANCE AND ADMINISTRATION COMMITTEE. CHAIRMAN: MR. CHARLES W. SCHULZE.

OLD BUSINESS: None.

NEW BUSINESS:
Item 19.  Financial Status Report of the Medical University of South Carolina.

Statement: Mr. Patrick Wamsley reported that as of March 31st, the University reported 68 Days of Operating Cash totaling $98.7 million which is an $8 million increase from February. MUSC’s current funds statement (budget to actual) has a bottom line of about $903,000. There are some late in the year additions to expenditures which are being watched closely to try to ensure a positive bottom line at year end.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.


Statement: Ms. Gina Ramsey reported for March 31st, MUSC Physicians has done well with revenues and collections through the first nine months. The Operating Margin is $37.9 million which is up from last year. However, when you look at total margin, we are still being impacted by the investment market so MUSC Physicians doesn’t have the returns that we had a year ago at this time. The bottom line is slightly negative. We have 40 days in accounts receivable which is flat compared to last year. In April, our total charges were on budget so even with the installation with EPIC we did not see our charges go down.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.


Statement, Ms. Michelle Garbiras reported through March 31st the Foundation had a net asset increase of $642,063. The ending net asset balance as of March 31st is just over $1 million. The Foundation had a good year primarily due to the $1.85 million royalty and license income collected with $1.26 million being paid back to MUSC.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.

Item 22.  Other Committee Business.  None

UNIVERSITY PHYSICAL FACILITIES COMMITTEE. CHAIRMAN: MR. WILLIAM H. BINGHAM, SR.

OLD BUSINESS: None.
NEW BUSINESS:

Item 23. Update on Projects.

Statement: Mr. John Malmrose reported that Mr. Bingham had requested the University engage Design Strategies to help determine how we could use the eight historic properties on Ashley Avenue, Doughty Street, Rutledge Avenue and the Sebring Aimar House to the best benefit of the University. Mr. Ben Rook and Mr. Jim Burns from Design Strategies were introduced to present their work.

They stated they were asked to look at the highest and best use of each of the properties and determine if it is financially feasible to perform those at each of the facilities. They concluded the highest and best use of the Sebring-Aimar is office space; 166 – 168 Ashley is mixed use; the properties on Doughty would be office space and 159 1/2 and 161 Rutledge – residential or mixed use.

They provided a financial overview of the properties and at the conclusion of the analysis they recommended the following:

- Complete Sebring-Aimar Restoration while locating office tenant
- Transfer ownership of Ashley and 5 Doughty properties to the Foundation at current price points
- Concluded it is financially feasible to renovate and rent all three groups – Ashley Street, Doughty Street and Rutledge Avenue
- Properties on Ashley Avenue could be renovated by the Foundation and rented as mixed use - maintain and secure the edge of the campus for University use
- Rutledge and Doughty properties – 3 options:
  - No Restrictions on the sale of the properties
  - Dispose of the properties to “Friendly” developers with restrictions
  - The Foundation could develop for University or private use

The good news is that all the options are financially feasible; it is just a matter of what the University wants to do with the properties. If we were to make a recommendation, our option would be to dispose of the properties to a “friendly” developer with restrictions. There is no harm in going ahead and putting them on the market and then negotiating the restrictions in the offers.

Tom Anderson stated the Foundation has already proceeded to re-list the properties. The Foundation would like to see an independent party buy the properties and renovate them but will be willing to do whatever the University wants.

Recommendation of Administration: That this be received as information.

Board Action: The report was received as information.

Item 24. Other Committee Business. None.
Item 25. Facilities Contracts Awarded.

Statement: The facilities contracts awarded since the last meeting were presented for information.

Recommendation of Administration: That the report be received as information.

Board Action: Received as information.

MEDICAL UNIVERSITY OF SOUTH CAROLINA AUDIT COMMITTEE. CHAIRMAN: MR. WILLIAM B. HEWITT

OLD BUSINESS: None.

NEW BUSINESS:


Statement: Mr. Hewitt stated the Committee and other members of the Board had an Entrance Conference with KPMG and the meeting went well.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.


Statement: Mr. Hewitt stated a report had been received from the Internal Auditor and if there were no questions the report would be received as information.

Recommendation of Administration: That this report be received as information.

Board Action: Received as information.

Item 28. Other Committee Business. None

Item 29. Revisions to the Code of Conduct.

Statement: Approval of the revisions to the Code of Conduct was requested.

Recommendation of Administration: That the revisions be approved.

Board Action: It was moved, seconded and unanimously voted that the revisions to the Code of Conduct be approved.

OTHER BUSINESS FOR THE BOARD OF TRUSTEES:

Item 30. Approval of Consent Agenda.
Statement: Approval of the University Consent Agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the consent agenda be approved.

Item 31. New Business for the Board of Trustees.

Chairman Stephenson stated Dr. Johnson had asked for an executive session to discuss contractual matters. The motion was seconded and the Board went into executive session.

At the conclusion of the executive session and back in open session, Chairman Stephenson stated no action had been taken.

Item 32. Report from the Chairman.

There being no further business, the meeting of the University Board of Trustees was adjourned.

Respectfully submitted,

[Signature]

Hugh B. Patinkin III
Secretary

HBF:wcj
April 30, 2012

To: Mark Sothmann, PhD, Vice-President for Academic Affairs and Provost
Re: Fees for the Certificate in the Biomedical Sciences
From: Perry V. Halushka, PhD, MD, Dean, College of Graduate Studies

Fees to be collected by the College of Graduate Studies:

Histology fee required by University of South Carolina
  In state student $1,221
  Out of state student $3,246

Anatomy fee required by MUSC $200
  This would be used to purchase anatomy software
to create online resources, purchase license of anatomy
software to load on MUSC computers, buy plastic models
and cover the costs to prepare plastinated prossections
for them to study,

With this memo, I am asking if you would please submit the request to the
Board of Trustees to approve these fees at their May 17, 2012 meeting.

Thank you.
Medical University of South Carolina  
May 2012 Graduates

Bachelor of Science in Cardiovascular Perfusion

Alberto Jose Bermudez  
Gregory R. Davis  
Katie Hannan Faella  
Shannon Christine Heard  
Benjamin David McClain  
Yancey Collin Mooney  

Bachelor of Science in Nursing

Rebecca Lynn Allshouse  
Caroline Legare Atkinson  
Margaret Anne Augustine  
Kasey Cheyenne Bamel  
Kelly Ann Bramhall  
AnnaKathryn Victoria Brown  
Kathleen Conner Budds  
Bridgette Copeland Burch  
Victoria Leigh Cairco  
Anna Margaret Calhoun  
Lisa D. Carraker  
Heather Nichole Criddle  
Christine Marie Daneault  
Sarah Didow  
Elina DiMeglio  
Kristen Traynor Elmore  
Kairina Lynne Evans  
Imani Jaapor Fickling  
Elizabeth Ann Finch  
Karen Elizabeth Fries  
Cameron Funderburk  
Jameela Sherene Goudarzi  
Amanda Unett Green  
Kristen Sheppe Hindman  
Carlye Bell Hooge  
Aaron James Huber  
Sarah Elizabeth Hughes  
Kahea A. Isaac  

Bachelor of Science in Nursing

Bridget Ann Kinealy  
Brooke Allison Kotcella  
Laura Jean Ladd  
Kimberly Rae Leslie  
Dale Noel Lullo  
Rondria K. Manigault  
Senovia B. Mays  
Ashleigh Adaeze McCall  
Janice McFaddin  
Brittany Elizabeth Moore  
Lindsey Paige Palmer  
Jonathan Robert Papaharis  
Anne Mardel Powell  
Jade Wallace Prevost  
Jenelle Quenneville  
Veronica Ramos  
Karla Romero  
Thomas R. Rudisill  
Margaret Elise Skeele  
Brianna Yvette Smith  
Lindsey M. Solomon  
Andrew Michael Stufflebean  
Dawn Langley Thomas  
Edwin L. Triplett  
Megan Willoughby Tupper  
Jessee Davis Wagner  
Emily Ann Wofford  
Jasive Olivia Garza-Castillon Yunes

Master in Health Administration

Vincent Bruce Amacher  
Marshall Taylor Austin  
Jason Scott Basile  
Brittany Nicole Bennett  
Teresa C. Billig  

Master in Health Administration

Michael Joseph Bird  
Sterling Bird  
Sarah Jeanette Boyd  
Shannon Leigh Brennan  
Mary Elizabeth Bultman
Russell Bailey Calicutt  
Janet Katherine Cash  
Melissa Anne Cheseldine  
Caroline Reeves Cotter  
Lauren Marie Cox  
Elizabeth Mae Curley  
Stephanie Fipps Davis  
Matthew Brian Dickerson  
LeAndria Marteen Dingle  
Richard Brendan Doane  
Christine Marie Guerra  
Hailey J. James  
Mark Aaron Janowiak  
Heather G. Jones  
Sarah Katherine Kahn  
Kyle James Lancaster  
Ryan Dexter Lee  
Matthew Duffie Littlejohn  
David Drew Longshore  
Mikelyn Horton McGinnis  
Amy Caroline McLeod  
Deepti Meruva  
Anna Catherine Ouzts  
Aisha Simmons President  
William Rowan Render  
Kathryn Louise Roberts  
Kathryn Ruth Rollins  
Katherine Marie Schichtel  
Erik Anthony Sederstrom  
Angel Alanda Simmons  
Candice Dreher Springs  
Andrew Stephen Talcott  
James Henry Tolley III  
Jason Thomas Van Galder  
William Laird Wantland  
Jason Phelps Weaver  
Jeremey Whitaker  
Lori Thomas Winkles  
Mo Wei Yang

**Master of Science in Nursing**

Antonia S. Corrigan  
Nanette Leigh Godbee-Stephens  
Cameo Aleece Green  
Nicole Baker Staubes

**Master of Science in Biomedical Sciences**

Kristina Andrijauskaite

**Master of Science in Clinical Research**

Tara Lynn Barto  
Constance Guille  
Laura Elaine Houston

**Master of Science in Dentistry**

Erin Arnold  
Mary Katherine Gray  
Jeffrey W. Mirtieeles  
Brandon Keith Peterson  
Erika Andriana Sachno  
Kara Grasso Veeeder

**Doctor of Health Administration**

Latecia Monique Abraham  
William Herman Anderson  
Kinneil Coltman  
Latonya Bree Dunlow  
Danielle A. Dyer  
Taher M. Giaedi

**Doctor of Physical Therapy**

Christopher Michael Allen  
Steven James Alvarez  
Casey Rae Amato  
Landon Blake Amick
William Louis Berkes III
Matthew Bishop
Veronica Bolus
Kelsey Anne Bristol
Charles Christopher Bruner
Pierce Bruner
Katharine Bledsoe Buford
Jessica Anne Cokins
Ashley Patten Dew
Jordan Mitchell Disher
Christopher Owen Franz
Elizabeth Anne Gaffney
Connie Marie Garces
Lisa Eileen Gigliotti
Brittany Marie Gleason
Alycia Ann Gorski
Katie Elizabeth Green
Ryan Joseph Hine
Amanda Laney Horton
Bonnie Elizabeth Hostetler
Wayne Alexander Jackson
Mary Catherine Kayser
Sarah Inez Kenney
Kacie Leigh Knox
Carrie Blakeney Latham
Erin Lovelace
Katelyn Elizabeth Luby
Heather Lynn MacLaughlin
Abigail Kate Mays
Jessica Marcella McComb

Lori Kiser Merrow
Becky Lynn Miggenburg
Daniel Joseph Mogensen
Eric Daniel Monsch
Raymond Lockwood Murphy Jr.
Kathryn Corinne Newsom
Erin Elizabeth Parmelee
Shefali Patel
Charles Cory Patton
Amanda Lucia Peck
Amanda Pirovitz
Shana Glenn Poe
Jill Rowe Polhemus
Evan Pusillo
Alyson Rathge
Anne Elizabeth Redding
Matthew Alan Rinckel
Alison Brook Shaw
Ashley Jane Shepard
Suzanne Ashley Smith
Amanda Blair Stucky
Geoffrey Lawrence Temple
Ashley Latham Templeton
Emily May Tennant
Erynn Troy
Christine Sanders Walker
Heidi Maria Warren
Keli Jo White
Dane Kenneth Wilson

Doctor of Nursing Practice

Mary Pierce Armstrong
Randall H. Beckett
Heather Nicole Blanton
Jennifer Boyd Bootle
Susan Cheek-Williams
Toni Elizabeth Coaxum
Elizabeth Corley Davenport
Catherine O'Connor Durham
Cassie Carroll Frazier
Ellen Amanda Hardin
Ryan Nicole Law Johnson
Lindsey Diane Kettinger

Rachael Erin Mullis
Tiffany Anderson Phillips
Theresa Yvonne Gray Rashdan
Janee LaRaine Rivers
Elizabeth O'Connor Swanson
Lucy Mellette Peete Wessinger
Kristi Lyn West
Tiffany Hawkins Williams
Sarah Elizabeth Wippermann
Meredith Claire Wood
Christina Marie Young

Doctor of Pharmacy

Heather Victoria Altman
William Christopher Altman

Parrish Gage Atkinson
Stephen Blake Boggs
Shaunell Vyonnee Bostic
Whitney Monique Boston
Carol Berrios Brown
Lauren Corinne Byrd
James Richard Cantrell
Haley Morgan Carter
Kevin J. Cheifer
Camille English Cox
Margaret Anna Croom
Brittany Lauren Crosby
Robert DeClue
Dawn Michelle Devine
Tracy Michelle Duncan
Claire Elaine Dysart
Nicholas Todd East
David Harvey Felder, Jr.
Rebecca Hendrix Finley
Emily Anne Gaman
Channing Toney Garrett
Elizabeth Isaac Garrett
Portia Neka Gifford
Christopher Joseph Giguere
Drayton Adam Hammond
Michelle Ann Haracznak
Timothy Lucian Haselden
Matthew Ryan Hiott
Jessica Lee Ho
Gena Ann Hope
Heather Renee Hummel
Chadi M. Jaafar
Amanda Kristen Jacobs
Jaleel Devann Jennings
Jason Derrick Jones
Kimberly Joy Kaminski
Kostantinos Michael
Katsanekakis
Lauren Keeler
Rubaiyat A. Khan

Joshua Charles Kister
Vasilina S. Kochurina
James Nicholas Lech
Heather Margaret Lilley
Courtney Elizabeth Link
Cheryl Ann Lucas
Mason R. Mathis III
Matthew David Melton
Ashley Elizabeth Mishoe
Lisa Murphy
Dev Dolatrai Naik
Halil Tufan Nardali
Elizabeth Genevieve O'Hara
Lesley Ann Pahs
Jessica Ashley Patton
Whitney Bryan Pence
James Wade Pitts Jr.
Katherine Joyce Kavanagh Pitts
Katherine Ashley Pleasants
Thomas J. Redmond II
Horace Lee Reese III
Owen Thornton Reeves III
Robert Eric Richardson
Daniel Edward Roesch
Kelly Leanna Rosenbaum
Ashley Melissa Russell
Courtney Marie Sands
Virginia Cole Stanley
Paul Weldon Strange
Margarita Taburyanskaya
Athena Marie Tate
Denesh Candiah Thiagarajah
Jennifer Lisette Walters
Derrik Loyal Weddle, II
Matthew Walker Williams
Natalie Hay Williams
Aubry Jane Willmann

Doctor of Dental Medicine

Creighton Jones All
Britney Kay Bare
Jonathan Dillman Bean
Anthony Paul Blackman
Caroline Ferrell Branchal
Sean Scott Britton
Sarah Allison Brown
Jeffry Adam Burke
Christopher Talbot Carter

Tyler Randall Caruso
Ava Graichen Cherry
Seung Kyu Choi
Katharine Lee Claussen
Patricia Carolyn Coleman
Louis Edward Costa III
Isaiah L. Davis
Justin Matthew DeGarmo
Benjamin David Drechsler
Mollie B. Duke
Virginia Ann Fadeley
Drew David Farmer
Patricia Jordan Fast
Bradley Dargan Flowers
Kaitlin VanSickle Forshee
Robert Kenny Gildner
Danielle Gladneice Gill
Emily Diane Gilstrap
Paul Michal Goforth
Adam Stephens Gordon
Charles Preston Hamrick
Juliana Marie Head
Nathen Douglas Head
Derek Adam Hoffman
Mary Alice Vickery Hughes
Joshua Glenn Hyatt
Mary Caroline Jarrell
Jennifer Lauren Jones

Benjamin Craig Jordan
Samuel Balfour Joyner, III
April Nichole Kemp
Daniel Craig Leach
Elizabeth McMillan Green Malone
Sarah Ruth Marks
Kathryn Ellis McDaniel
Charles Andrew Mowlajko
Mallory Jean Northcutt
Brad Duncan Peper
Caleb Jerd Poston
Erin Hyatt Pruett
Kyle MacKay Rush
Rula Mahmoud Shalabi
Vatsal Suthar
Carlisle Major Vereen III
Elizabeth Reid Patrick Warren
Ashley M. Webb
Daniel Robert West

Doctor of Medicine

William Greer Albergotti, III
Andrew Rutledge Alkis
Mallory Hudson Alkis
Kristen Nicole Arnold
Travis Dowling Ayers
Samuel Dean Baughman Jr.
Margaret Edmonds Beaudrot
Anna Hicklin Benson
Jonathan Michael Berbin
William John Berglind
Danielle Kusserow Bersabe
Russell Steven Blackwelder
Brian David Blaker
Leah Ashley Bonaparte
John Herbert Borkert
Seth Harrison Bowman
Louise Sutton Boyd
Timothy Michael Brand
George Wesley Branstiter III
Robert Rashad Brightarp
Jonathan William Ceral Brock
Day Michelle Burruss
Christine Anne Cameron
William Wise Crosby Carroll
Emma Grace Carter
Reid Cameron Chamberlain
Muhammad Ibrahim Choudry
Douglas Kendrick Christie

Andrew Farish Colhoun
Anna Catherine Collins
Zachary Gatlin Coward
Elizabeth Quattlebaum Cox
Eimile Dalton-Fitzgerald
Charles Andrew Daly
Stephen Clay Daniel
Kristine Elizabeth Day
Guillermo Alberto De Angulo
Krupa Dilip Desai
Rasesh Arunn Desai
Clinton Donald Dickert
Isaac Felder Dingle
Grace Daniel Dukes
Jenny Leigh Feldman
Derek John Feussner
Maya Ereyina Fields
Michael Thomas Fitzgerald
Vidyaratna Atalanta Fleetwood
Jessica Ashley Forcucci
Benjamin Scott Friday
Katie Powers Friday
Laura Mabe Gardner
Weston Harris Geddings
Kevin Patrick Gibbs
Joshua David Gray
Irl Brian Greenwell
Jared Arthur Guichard
William Timothy Halligan
Julius Erving Hamilton
Michael Jesse Harling
Ana Tracey Harris
Kyle Michael Harvey
Alexander Macrae Harvin
Joannie Lynn Hayes
Karl Joseph Horn
Susan Gray Hurley
Joseph A. Hutson
Aaron David Hyson
Nekaiya Shontiera Jacobs
Jon Patrick Jennings
David Charles Johannesmeyer
Crystal Noelle Johnson
Joseph John Kavolus II
Kathryn Wulbern Koval
Stephanie Pettus Kwon
Daniel Paul Leas
Simon Joseph Lehtinen
Edward Thomas Lewis III
Tyler John Loftus
Rebecca Grace Lopez
Brandon Terell Marion
Laura Young Martin
Sean Albert Marzolf
Anesha Ann marie Maxwell
Robert Kane McCall
James Thompson McClain
James Lucas McFadden
Marc Carpenter McLawhorn
Alex Stewart McPherson
Justin Douglas Moody
Valerie Kirkland Moody
Nathan Michael Moroski
Merrideth Ashley Morris
Tara Hudak Olson
Dennis Orwat
Kelly Elizabeth Orwat
Seth James Masaru Palesch

Doctor of Philosophy

Katherine Atassi
Margaret Holbrook Broadwater
Monica Elise Cornelius
Elizabeth Babb Fowler
Kathryn Alexa Orr Gandy

Daniel Nathan Pasko
Ankit Patel
Dhyanesh Arvind Patel
Vedang Rajiv Patel
Karen Steffle Patrick
Katherine Bristow Patrick
Scott J. Pearson
Kevin Michael Phelan
Allison Anne Praktish
William Jefferson Rieter
Chantel Springe Roedner
Jilian Rinehart Sansbury
Andrew Robert Sas
Dylan Jacob Sheridan
Ann Michelle Simonin
Wendy Devonne Singleton
Laura Elizabeth Smith
Valerie Alison Smith
Sybil Ope Sobanjo
Brent Logan Soder
John Robert Spratt
Lindsay Marie Stewart
Stacy Joanne Story
Stephanie Adams Strickland
L. Jarod Suber
Dezmond Bernard Sumter
Matthew Robinson Tice
Elizabeth Anne Trent
Neill Ryan Tuten
Justin John Uzl
Johanna Bailey Von Hofer
Andrew Charles Voris
Jefferson Tyler Watson
Rebecca Jean Wessinger
William Godfrey Wheeler III
John Francis Wiles
Kristin Renee Williams
Alexander Henry Winters
Mathew David Wooster
Robert James Yawn

Robin Dianna Evans Matutina
Jill Marie Monfre
Matthew Allen Smith
Genevieve Marie Thul
Tejas Shirish Tirodkar
Doctor of Medicine and Doctor of Philosophy

Adnan Al-Ayoubi
DeAnna Andrea Baker
Christopher Ryan Gault
Linda Augusta Heffernan-Stroud
Russell William Jenkins

Khaled Moussawi
Thomas Drakeford Mullen
Ryan Matthew Rhome
Adrian David Sproul
Persons covered by this policy

This policy applies to all Trustees, Officers, Faculty, Administrators, and Staff, including all full-time, part-time, temporary, and contract Employees of Medical University of South Carolina ("MUSC") and Medical University Hospital Authority ("MUHA"). Affiliates (entities which derive their not for profit status from MUSC, such as MUSC Physicians, the MUSC Foundation, and the MUSC Foundation for Research Development) shall as a condition of continued business with MUSC and MUHA adopt a policy substantially similar to this Policy, adapted to accommodate those affiliate employees who are not public employees.

Preamble

1. Enhancing the public good through improved health initiatives and superior economic development is the foundation of many government policies. MUSC, as a contemporary, public research university, has a responsibility to actively participate and promote these initiatives even if conflicts of interest are more likely and many times unavoidable. Conflicts of interest, therefore, may arise from ordinary and appropriate activities as a part of assigned employment duties so the existence of a conflict should not imply wrongdoing. When conflicts of interest do arise, however, they must be recognized and disclosed, then eliminated or appropriately managed. The Board of Trustees for MUSC and MUHA has a duty to govern those State entities in a manner such that conflicts are appropriately reviewed and acted on to maintain public confidence in the integrity of our institutions.

2. This policy provides a framework for recognizing and managing employee conflicts of interest, and should minimize even the appearance of conflicts of interest. The primary goal of this policy is to prevent an employee’s activities from adversely influencing MUSC or MUHA operations.

3. Particular departments and activities of MUSC or MUHA may have specific conflict of interest policies. It is intended, however, that this policy will apply to the entire MUSC enterprise, providing a framework for those specific additional policies to operate under, such
that those specific policies will not supersede this policy unless approved by the Board of Trustees.

4. This policy references South Carolina Code (S.C. Code § 8-13-10 et seq.) (the "Ethics Law"), which makes it unlawful for public officials, public members, and public employees to use their position to obtain an economic interest or to have a financial interest in most any contract or purchase connected with MUSC/MUHA, unless certain exceptions apply. This policy is implemented in addition to all requirements of the Ethics Law and does not supersede it. The South Carolina Ethics Law is athttp://www.scstatehouse.gov/code/t08c013.php

5. As MUSC conducts research funded by the Public Health Service and other federal agencies, it is required by federal law to maintain an appropriate written, enforced policy on conflict of interest that complies with 42 CFR Part 50 Subpart F - "Responsibility of Applicants for Promoting Objectivity in Research for which Public Health Service Funding is Sought" and 45 CFR Part 94 "Responsible Prospective Contractors" as well as all other relevant policies of federal funding and oversight agencies.

A. Statement of general policy

1. MUSC/MUHA policy is that its employees conduct the affairs of MUSC/MUHA in accordance with the highest legal, ethical and moral standards.

2. MUSC/MUHA policy is that employees of MUSC/MUHA shall disclose perceived and real conflicts of interest.

3. MUSC/MUHA policy is that employees shall not use their position to secure personal financial benefits or economic interest for themselves, any member of their immediate family, any individuals or entity with whom the employee has a business relationship that renders an employee economic benefit. A perceived and/or real conflict of interest arises whenever the employee has the opportunity to influence University or Authority operations or business decisions in ways that could result in a personal financial benefit or economic gain to the employee, a member of an employee's immediate family, or individuals or entities with whom the employee has a business relationship which renders the employee economic benefit. Although certain specific examples of conflicts of interest are provided in this policy, they are meant only as illustrations, and supervisors and employees are expected to use good judgment to identify possible conflicts of interest that may adversely influence MUSC/MUHA operations, and to avoid or manage them as appropriate.

4. This policy is not intended to prohibit approved and appropriately managed economic development activities related to MUSC/MUHA generated intellectual property, including MUSC/MUHA employee involvement with startup companies, Small Business Administration (SBIR/STTR) funded research and Centers of Economic Excellence Activities. However, any such activities by MUSC/MUHA employees that make use of University or Authority property, facilities, equipment or other resources for personal benefit shall be approved as required herein, of benefit to MUSC/MUHA, and for fair value.
5. Nothing in this policy shall be construed to permit, even with disclosure, any activity that is prohibited by law.

B. Definitions

1. Conflicts of interest occur when an employee or immediate family member receives personal financial benefit or an economic interest from the employee's position in a manner that may inappropriately influence the employee's judgment, compromise the employee's ability to carry out MUSC/MUHA responsibilities or, be a detriment to MUSC/MUHA integrity.

2. Immediate family includes the employee's parents, spouse, siblings, children, stepchildren, and grandchildren.

3. Manage and managing means an affirmative action by the University or the Authority to establish parameters or conditions that minimize or eliminate the risk of the perceived or real conflict of interest.

4. Personal financial benefit or economic benefit is defined as anything of monetary value, including salary, commissions, fees, honoraria, gifts of more than nominal value, equity interests, interests in real or personal property, dividends, royalty, rent, capital gains, intellectual property rights, loans, and forgiveness of debt. "Personal financial benefit" does not include:

a. compensation or payments received from MUSC/MUHA or any of its affiliates or the Ralph H. Johnson Department of Veterans Affairs Medical Center;

b. payments for participation in seminars, lectures or other educational activities as long as not acting in the employee's official capacity, or reasonable expenses for the same activities even if acting in official capacity;

c. payments for participation in seminars, lectures or other educational activities sponsored by and service on advisory or review panels for a federal, state, or local government agency, an institution of higher education as defined at 20 U.S.C 1001(a), an academic teaching hospital, a medical center, or a research institute that is affiliated with an institution of higher education, and reasonable expenses for the same activities as long as acting within the context of an individual's Faculty Appointment Contract;

d. any financial interest arising solely by means of investment in a mutual, pension, or other institutional investment fund over the management and investments of which the employee or an associated immediate family member does not exercise control; and

e. investments in publicly traded entities as long as the value of the employee’s equity interest in the entities is less than $5,000.

5. University means Medical University of South Carolina.

6. Authority means the Medical University Hospital Authority.
7. MUSC or MUHA institutional responsibilities are defined as the responsibilities of an employee to perform MUSC or MUHA activities as defined by management or contract.

C. Policy provisions

1. An employee shall disclose any situation in which the employee has, or may have, a real or potential conflict of interest as defined herein. These conflicts of interest must be reported annually to the Conflict of Interest Office. Modifications to existing disclosures or a new activity will require submittal of an additional disclosure in a timely manner. An authorized group of employees shall review the disclosure and recommend to the appropriate Vice President a suitable action plan to eliminate or manage the conflict of interest so as to ensure that MUSC or MUHA business is not improperly influenced or adversely affected. In the event that there is no reasonable way to manage a conflict of interest, then the employee may be prohibited from participating in related MUSC/MUHA affairs until such a time as the conflict is eliminated. In other words, employees and Officers of MUSC/MUHA have a duty to immediately disclose, manage or eliminate any real or potential conflicts of interest that are not in the best interests of the University or Authority.

a. An employee shall disclose conflicts of interest in writing on an approved paper or digital Conflicts of Interest Disclosure Form, including a statement describing the nature and extent of the conflict, to their supervisor and to the Conflict of Interest Office. This disclosure must be completed annually, on a form designated for such purposes. A new disclosure form must be completed whenever a new conflict of interest arises or when a significant change occurs concerning and existing disclosure. See the following website for this disclosure form: Annual Conflict of Interest Disclosure www.musc.edu/coi.

b. If a supervisor becomes aware of a conflict of interest that an employee has not disclosed, the supervisor shall discuss the situation with the employee, require that a written disclosure be made as provided in this policy, and inform the Conflict of Interest Office to anticipate the receipt of a new Disclosure Form.

c. All conflicts of interest shall be reported to the Conflict of Interest Office. The Board of Trustees or its designee will retain authority to take such action as it deems appropriate regardless of any action or inaction by an Officer of MUSC and/or MUHA.

2. The following are examples of conflicts of interest requiring disclosure. These examples are illustrations only and are not meant to be exclusive.

a. Employee or immediate family member has a financial interest in a business entity with which the University or Authority does or proposes to do business, and the employee is in a decision-making role or otherwise is in a position to influence the University's or Authority's business decisions regarding the business entity. Business entity examples for which an employee disclosure is required:

   i) finance or accounting services
   ii) equipment services
iii) marketing services  
iv) construction services  

v) consulting  
vi) counseling  
 vii) catering  
viii) computer supplies  
ix) programming  
x) architectural services  
 xi) legal services  
xii) grant preparation  
xiii) temporary personnel services  
xiv) office or laboratory supplies  
xv) painting services  
xvi) lawn and grounds services  

b. Employee holds or assumes an executive, officer or director position in a for-profit or not-for-profit business or entity engaged in commercial, educational, or research activities similar to those in which the University or Authority engages.  

c. Employee participates in consultation activities for a for-profit or not-for-profit business or entity engaged in commercial, educational or research activities similar to those of the University or Authority.  

d. Employee holds or assumes an executive, officer or director position in a for-profit or not-for-profit business or entity that does business with the University or Authority.  

3. The activities listed below are prohibited unless sanctioned by an Officer of the University or Authority. Sanctioned activities are those activities documented within an individual’s Faculty Appointment Contract, contained within an employee’s job description or expectations, appropriately authorized agreements, Memoranda of Understanding, or otherwise approved by the employee’s Vice President.  

a. Significant use of University or Authority property, facilities, equipment or other resources in any manner other than as part of the employee’s responsibilities, that results in personal financial benefit or economic interest to an employee, a member of an employee’s immediate family or business with which the employee has a business relationship.  

b. Using significant University or Authority property, facilities, equipment or other resources in any manner to support an entity not associated with the University or Authority unless special permission is provided in writing by an authorized Officer of MUSC or MUHA.
c. Using University or Authority stationery, letterhead, logo, or trademark in connection with outside activities, other than activities having a legitimate relationship to the performance of University or Authority business.

d. Using University or Authority facilities, resources, or the employee's position at the University for the purpose of advocating, endorsing, or marketing the sale of any goods or services, other than as part of the employee's responsibilities, without the prior approval in writing by an authorized Officer of MUSC or MUHA.

e. Using the University or Authority name, trademark or trade name for personal business or economic gain to the employee, a member of the employee's immediate family or a business with which the employee has a business relationship.

f. Using any University or Authority intellectual property data or information that is not in the public domain for personal financial benefit or economic gain to the employee or a member of the employee's immediate family, or a business which the employee has a business relationship.

g. Using any University or Authority employee for any outside activity during normal work time for which he or she is receiving compensation from the University or Authority (not applicable when employees are on a paid or unpaid leave).

h. Participating in the selection or awarding of a contract between the University or Authority and any entity with which an employee is dually employed, IS seeking employment or has been offered employment.

i. Other activities may be prohibited if there is no reasonable way to manage an associated conflict of interest.

D. Employee responsibilities

1. Employees shall not engage in the prohibited activities listed above unless sanctioned in advance or in any other activity that has been prohibited following a completed review of an employee's conflict of interest disclosure.

2. Employees shall disclose a real or perceived conflict of interest as described above:

   a. As soon as the employee knows of the conflict, and then annually thereafter for as long as the conflict continues to exist;

   b. In writing on the approved Conflict of Interest Disclosure Form;

   c. To the Conflict of Interest Office;
3. Employees shall avoid any involvement with all related University or Authority activities and decisions until such time as the conflict of interest has been evaluated and the disclosed activity been approved.

4. If there is any question whatsoever about an activity representing a conflict of interest, then the employee should consult with the Conflict of Interest Office or an MUSC or MUHA Office of Legal Counsel for direction.

E. MUSC/MUHA responsibilities

1. Supervisors shall ensure that all new employees are informed of this policy.

2. Supervisors and administrators of MUSC and MUHA shall ensure that all current employees are reminded of this policy on a periodic basis.

3. The University and Authority shall develop a peer process to evaluate conflict of interest disclosures, and to review the conduct of approved Management Plans.

4. In the event that a reported conflict of interest is approved, the Conflict of Interest Office shall ensure there is an appropriate Management Plan in place to monitor and manage the situation so that resources are used in an appropriate manner and that there is no improper influence on University or Authority decisions.

5. The Conflict of Interest Office shall ensure that Conflicts of Interest Disclosure forms are retained for future reference. Upon an employee's transfer from the unit or termination from the University or Authority, associated Conflict of Interest Forms shall be retained by the Conflict of Interest Office for a minimum of three years.

6. Supervisors shall establish and maintain a work environment that encourages employees to ask questions about real or potential conflicts of interest.

7. If supervisors have any question whatsoever about an external activity representing a conflict of interest, they should consult with the Conflict of Interest Office or an Office of Legal Counsel.

F. Sanctions for violation

1. Violations of University or Authority policies, including the failure to avoid a prohibited activity or disclose a conflict of interest in a timely manner, will be dealt with in accordance with applicable policies and procedures that may include disciplinary actions up to and including termination of employment.

2. The Board of Trustees, as the ultimate governing body, or its designee retains authority to make a final determination of any matter covered by this Policy.

G. South Carolina state law
1. The South Carolina Ethics Government Accountability and Campaign Reform Act (herein the "Ethics Law") S. C. Code § 8-13-100, among other things, makes it unlawful for a public official, public member or public employee to knowingly use his official office, membership or employment to obtain economic interest for himself, a member of his immediate family, an individual with whom he is associated" or a business with whom he is associated". This policy is implemented in addition to any requirements of the Ethics Law. Certain persons associated with the Authority or University are required to make filings with the South Carolina Ethics Commission and completion of the form attached to this policy will not satisfy that requirement.

* Defined in the Act as: "Individual with whom he is associated" means an individual with whom the person or a member of his immediate family mutually has an interest in any business of which the person or a member of his immediate family is a director, officer, owner, employee, compensated agent, or holder of stock worth one hundred thousand dollars or more at fair market value and which constitutes five percent or more of the total outstanding stock of any class.

** Defined in the Act as: "Business with which he is associated" means a business of which the person or a member of his immediate family is a director, an officer, owner, employee, a compensated agent, or holder of stock worth one hundred thousand dollars or more at fair market value and which constitutes five percent or more of the total outstanding stock of any class.

**Office responsible for this policy**

Conflict of Interest Office

**Policy Review.**

This Policy, if approved, establishes a set of conditions that may have an unanticipated impact on existing MUSC, MUHA, and affiliate policies and procedures. Given the breadth of this policy, it seems reasonable that not only may some unforeseen consequences surface but that State or federal compliance regulations may require some alterations to this Policy. A periodic review of this Policy by the Vice President for Academic Affairs and Provost, acting on behalf of the Vice Presidents, seems most appropriate. If proposed change(s) is(are) considered necessary and appropriate, a Vice President may ask the Board of Trustees to modify this Policy by approving the change(s).
Institutional Conflicts of Interest Policy

Introduction: The Medical University of South Carolina has an obligation to the citizens of South Carolina and to the public at large to conduct its activities properly. Accordingly, the University must provide clear standards aimed at preventing financial conflicts of interests (FCOI) from compromising its objectivity in the performance of its responsibilities. This Policy on Institutional Conflicts of Interest (the "Policy") concerns conflicts that arise from the University’s financial relationships with external entities. It is intended to provide guidance to the Board of Trustees, administrators, faculty and staff to enable them to recognize and deal with institutional conflict of interest (ICOI), both real and perceived, that may arise in the course of business relationships between the University and private entities outside of the University.

Consistent with its obligation to uphold the public trust, the University is committed to extending the reach of its research and learning activities beyond the campus community and to enriching the education of its students and the professional lives of its faculty and staff through public engagement. The University’s mission of research, teaching and service is well served through the creation of collaborations with people and entities outside the University that better enable all concerned to meet the challenges of an increasingly complex world. Collaboration, particularly where external financial sponsorship is involved, may result in the creation of inherent tensions between the University’s role as an independent creator and evaluator of knowledge, and the interest of the parties to the collaboration in achieving a positive outcome. Where such tensions have or appear to have the potential to interfere with independent decision-making on the part of University personnel, or to compromise the objectivity of research, the University must examine whether an institutional conflicts of interest exists.

Such conflicts of interest may be individual conflicts of interest involving the personal financial relationships of University trustees, administrators, faculty, staff or students with entities that conduct business with the University. Individual financial conflicts of interest are regulated by the MUSC/MUHA – Conflicts of Interest Policy, originally dated February 13, 2009 and any subsequent modifications thereafter, and generally are outside the scope of this Policy except in cases where individual employees with wide administrative authority possess personal financial interests that intersect with their University duties, as explained below.
This Policy defines institutional conflicts of interest, provides examples and sets out rules for the guidance of University trustees, administrators, faculty and staff. It is hoped that by increasing awareness of the potential for such conflicts and providing a process to address them, this Policy will both protect the integrity of the University and will encourage University personnel to enter into and conduct University activities involving engagement with outside entities with transparency, confidence and integrity.

Gifts, pledges, and solicitation of gifts to MUSC are important to its missions. However, no charitable donation is allowed to be contingent upon the outcome of any research or business transaction conducted at or by the Institution. The Institution hereby affirms that it will not solicit or accept gifts that in any way limit the ability of its investigators to conduct and/or report the results of research in accordance with the highest scientific, medical, professional, and ethical standards. Nor will the Institution solicit or accept gifts (including gifts to support research) that are contingent upon any particular business or purchasing decision(s). All gifts to MUSC must be handled in accordance with the institutional fund raising and gift acceptance guidelines and should be forwarded to the appropriate administrative office for processing and record-keeping purposes. Faculty and staff members are accountable for adhering to institutional gift policies.

In some cases, the Institution may enter into arrangements involving the donation of all or a portion of capital equipment, with the expectation that the equipment will be used for research or patient care. Such arrangements are appropriate, provided they do not limit the professional independence of faculty and staff.

Policy: It is the policy of MUSC that, in pursuing its mission of education, research, and clinical care, the University must conduct its business free of improper influence resulting from Institutional conflicts of interest. Potential conflicts of interest between the Institution's primary missions or objectives and its financial interests must be identified, reviewed, and properly managed or eliminated. Such Institutional Conflicts of Interest are not inherently unethical; however, they may introduce risks to the integrity of the Institution.

Definitions: For purposes of this Policy, the following definitions apply:

Institutional Conflicts of Interest (ICOI): An institutional conflict of interest exists where a financial relationship between the University and an external entity compromises the integrity of institutional decision-making. Such conflicts may arise in situations where a University trustee, administrator, faculty or staff member holds administrative or decision-making authority of such a scope that the University cannot engage in a questioned activity or relationship independent of his or her involvement, and at the same time that person has personal financial interest that relate to the proposed activity or relationship.
becomes affected by University financial relationships may lead to a violation of this Policy. (Examples of institutional conflicts of interest are attached in Appendix A.)

For purposes of this Policy, University employees shall be defined as trustees, officers, faculty, administrators, and staff, including all full-time, part-time, temporary, and contract employees. MUSC affiliates, e.g., MUSC Physicians, MUSC Foundation and MUSC Foundation for Research Development, shall adopt a policy substantially similar to this Policy. Financial interests shall include anything of monetary value, including salary or other payments for services, equity interests, and intellectual property rights of the University employee or of his or her immediate family members. Immediate family members shall include an employee's parents, spouse, siblings, children, stepchildren, and grandchildren. Interests in mutual funds or similar type of investments where the employee has no control over the selection of holdings shall not be considered a personal financial interest under this Policy.

Covered Individuals: This Policy covers all senior-level personnel who are in a position to make decisions for the University that affect the following:

- the conduct of research, especially research involving human subjects;
- the use of University resources, including decisions involving expenditures, purchasing, investments, equity and technology transfer;
- the execution of contracts and grants; or
- the licensing of University intellectual property to external parties.

Institutional Officials: For the purpose of this Policy, Institutional Officials are the covered individuals. The University will be vigilant especially of these officials in the review of their individual Annual Conflicts of Interest Disclosure and may require additional information for the purpose of assessing Institutional Conflicts of Interest. These include:

- MUSC President;
- MUSC Vice Presidents;
- Academic Deans; and
- Other senior administrators, as determined by the MUSC Institutional Conflicts of Interest Officer in consultation with the President, the Vice President for Academic Affairs and Provost, and three MUSC Compliance Officers.

General Standards and Requirements

Reporting Requirements. Outlined below are reporting requirements for Institutional Officials and Institutional financial interests.

This policy mandates that Institutional Officials report financial and/or fiduciary interests so that ICOIs are identified and addressed in accordance with this Policy and in accordance with MUSC and MUHA Board of Trustees' Policy on Conflicts of Interest originally dated February 13, 2009 and approved policy modifications that follow.
Institutional Officials must report their family's financial interests annually through the standard individual conflicts of interest disclosure and disclosures must be updated within 30 calendar days after their financial and/or fiduciary interest changes. Reporting shall include:

- Equity and/or ownership interests in publicly traded for-profit organizations of any amount. Not included are: 1) equity or ownership interests in mutual funds; and 2) equity or stock holdings for which the Institutional Official has no role or influence over trading decisions;

- Equity (including stock, options, warrants, and the like), ownership, or founders' interests in non-publicly traded companies;

- Any fiduciary interest, such as service on the board of directors of a for-profit and/or not-for-profit organization; and,

- Any income, including royalty, equity, consulting fees or other payments, from for-profit and/or not-for-profit organizations.

**Reporting Institution’s Financial Interests.** The following financial interests of the Institution must be reported to the Conflicts of Interest Office no less than **annually** in accordance with procedures coordinated by MUSC’s Institutional Conflicts of Interest Officer, and must be updated within 30 calendar days after actual changes in financial and/or fiduciary interests are known. By State law, the only MUSC Enterprises that can hold equity interests are the MUSC Foundation for Research Development, MUSC Foundation and MUSC Physicians. Specifically, all elements of MUSC shall report the following to MUSC’s Institutional Conflicts of Interest Officer:

- Equity and ownership interest(s) worth more than $100,000 in any and all publicly-traded, for-profit organizations, except for interests held in the Institution’s endowments, and those interests where Institutional Officials have no role in trading decisions;

- Equity and ownership interests of any amount in any for-profit and/or not-for-profit organization that is not publicly traded, except those interests where Institutional Officials have no role in trading decisions;

- Gifts of $100,000 or more from any for-profit organization or philanthropic unit associated with a for-profit and/or not-for-profit organization; and,

- Payments, including royalty payments, resulting from technology transfer, licensing, and business activities such as Institutional consulting or service agreements that, for each arrangement, have the potential to exceed $100,000 per year. Clinical care income and tuition income are not included as Institutional interests.
Sanctions for Violations. Violations of this Policy, including the failure to avoid a prohibited activity or disclose a conflict of interest in a timely manner, will be dealt with in accordance with applicable policies and procedures that may include disciplinary actions up to and including termination of employment.

Review Responsibility. ICOIs related to research not involving human subjects are reviewed by the Institutional Conflicts of Interest Committee. ICOIs related to human subjects research will be reviewed by an appropriate MUSC Institutional Review Board as well as the Institutional Conflicts of Interest Committee. The MUSC Institutional Conflicts of Interest Committee is appointed by the President and the Vice President for Academic Affairs and Provost, Medical University of South Carolina. These two MUSC Officers will charge this Committee accordingly. A draft of the Committee’s Charter and Operating Guidelines will be submitted for administrative approval shortly after this Policy is approved.

Institutional Conflicts of Interest Committee Members. It is the responsibility of the President and Vice President cited above to select the members of this Committee. The members will be between three and five in number, and will not be employees of MUSC or its affiliates. It is strongly suggested that the Committee be composed of individuals who (a) can conduct objective reviews, (b) are knowledgeable collectively about the mission and funds flow of academic medical centers, and (c) have a well-grounded understanding of the principles that constitute institutional conflicts of interest. All members will sign appropriate confidentiality statements/agreements.

The assessment in the reviews must consider whether the financial and/or fiduciary interests reported in accordance with this Policy have the potential to appear to affect any of the following:

- Safety of human research subjects;
- Safety of patients; and
- Integrity of research

The standards and evaluation criteria do not vary by funding or regulatory oversight; additionally, the same standards apply to reviews of the financial interests of the Institution and of the financial and/or fiduciary interests held by Institutional Officials.

Making Recommendations. The review of a specific institutional conflict of interest case may result in one of three recommendations:

- No institutional conflict of interest. The arrangement does not represent a significant actual, potential, or perceived institutional conflict of interest that needs to be managed;

- Manageable institutional conflict of interest. The arrangement can be managed with required changes. In cases determined by the Institutional Conflicts of Interest
Committee to be manageable, the committee will recommend one or more management measures. These may include, but are not limited to:

1) effective recusal from decision-making regarding the proposed arrangement by the financially-interested Institutional Official and disclosure of the recusal to the appropriate individuals implementing the recusal;

2) reduction in the magnitude of the financial and/or fiduciary interest

3) disclosure of the financial interest in relevant publications, presentations, human subject consent forms, clinical procedure or other consent forms, educational material, etc.;

4) oversight by a disinterested senior individual or by a committee of senior level, disinterested individuals; and/or,

5) other measures as deemed appropriate.

- Unmanageable institutional conflicts of interest. The arrangement is not manageable and either the activity may not proceed or the financial interest must be eliminated or reduced in a timely manner. In cases judged to be unmanageable, eliminating or reducing the financial interest is preferable to prohibiting the proposed activity. The reviewing bodies and the institution should generally give precedence to activities that carry out institutional missions over conflicting financial interests.

In all cases reviewed, the Institutional Conflicts of Interest Committee must retain documentation of the review in accordance with established guidelines. In cases involving equity holdings that are considered to be an Institutional Conflicts of Interest, a Management Plan must be developed to resolve the conflict, and the implementation and oversight of the Plan must be reviewed periodically by the designated management team with reporting to the Conflicts of Interest Office to assure compliance.

All recommendations of the Institutional Conflicts of Interest Committee are presented to the MUSC Vice President for Academic Affairs and Provost, and the MUSC President for a decision. The decision is communicated by the President or the President's designee to: 1) the individuals affected; 2) the Chair of the Institutional Conflicts of Interest Committee through the MUSC Institutional Conflicts of Interest Officer; and, 3) the Chair of the IRB through the Director of the Office of Research Integrity when human subjects research is involved.

For any ICOI issue involving human subjects research, the IRB of record will have final authority to decide whether the interest and its management, if any, allows the human subjects research to be approved.

**Institutional Investment Assets, including Endowment.** The Institution's endowment includes assets received from philanthropy, investment, and other sources. The Institution hereby
affirms that the individuals charged with managing the investments and endowments of the Institution will not communicate with Institutional Officials or Institutional researchers concerning the conduct and interpretation of ongoing or planned research performed at the Institution for the purpose of influencing investment decisions. Maintaining this robust "firewall" is essential for ensuring that the core activities of the Institution are not affected, or perceived to be affected, by the Institution's interest in maximizing the value of the endowments. If an individual becomes aware of a situation in which there appears to be a conflicts of interest involving philanthropic gifts, solicitation of gifts, or management of the endowments, the individual must notify the appropriate Compliance Officer and/or the MUSC Institutional Conflicts of Interest Officer who will ensure that a thorough review of the arrangement is conducted, and if necessary, will refer the matter to the Institutional Conflicts of Interest Committee.

**Implementation.** The MUSC Institutional Conflicts of Interest Officer is responsible for procedures to implement this policy.
Appendix A: Examples of Institutional Conflicts of Interest

Financial relationships with external entities give rise to impermissible institutional conflict of interests when, in the interest of financial gain to the University or its internal units, the objectivity of the decision-making process or the allocation of resources is influenced in ways that (1) compromise the integrity of the University in fulfilling its mission, and (2) would not occur but for the existence of the external financial relationship.

Institutional Conflicts of Interest Examples. The following examples are not intended to be exhaustive:

1. Seeking to influence the award or terms of a University contract, including but not limited to research contracts, with an external entity because of a past, present or future gift from the external entity.

2. Seeking to influence a University research review committee [such as Institutional Animal Care and Use Committee (IACUC) or an Institutional Review Board (IRB)] to grant concessions or exceptions in reviewing or monitoring a research project involving technology in which the University has an equity interest.

3. Seeking to influence a University research review committee (such as IACUC or IRB) to grant concessions or exceptions in reviewing or monitoring a research project sponsored by an external entity in which the University has a financial interest.

4. Involvement by a University official in decisions affecting the terms and conditions of a faculty member’s University employment when the University official has made a personal financial investment in the faculty member’s start-up company.

5. Involvement by a University official affecting the terms and conditions of University business relationships with a University faculty member’s start-up company when the University official has made a personal financial investment in that start-up company.

6. Involvement by a University official in approving the investment of University funds in an entity in which that official holds a personal financial interest.

Potential Institutional Conflicts of Interest Examples. The following examples are not intended to be exhaustive:

1. Where the University is entitled to receive royalties from the sale of a technology that is proposed to be the subject of a University research project.
2. Where the University, through technology licensing activities, holds an equity interest or an entitlement to equity of any value in a non-publicly traded sponsor of research at the University.

3. Where the University, through technology licensing activities or otherwise, holds a significant equity interest in a publicly traded sponsor of research at the University and University Official(s) responsible for managing that equity interest are also involved in decisions concerning the conduct of University research sponsored by the entity.

4. Appointment of a University official with broad administrative authority to serve with or without compensation in either a personal or representative capacity as an officer, director, or scientific advisory board member of a sponsor of research conducted at or under the auspices of the University.

5. Allocation of laboratory or office space by a University academic department in a manner that unduly favors investigators whose research is sponsored by an entity that has provided the department with gifts.
Appendix B: Special Procedures for Human Subjects Research

The Foundation for Research Development, the MUSC Foundation, and MUSC Physicians shall compile a list of all entities in which the University holds an equity interest as part of a licensing arrangement and shall provide this list to all IRBs at the University. These Offices shall supplement the list as equity licenses are issued or as investments are sold.

In the event that the University or any University-related investment entity invests directly in an entity whose stock is not publicly traded, the Vice President for Academic Affairs and Provost will provide a list of such entities to all IRBs at the University. The Vice President shall supplement the list as additional investments are made or liquidated.

All human subjects research protocols submitted for regular or expedited review to any IRB must indicate 1) the nature and source of all drugs, devices or biologics to be used in the proposed research, 2) the source of all funding and 3) whether the proposed project involves the use of an invention or technology that is owned by the University or has been invented by a University employee or student.

An IRB shall refer a proposed research project to the MUSC Conflicts of Interest Officer for further review under this Policy where:

(1) The proposed research is funded by an entity on either the list compiled by the Foundation for Research Development, the MUSC Foundation, the MUSC Physicians, or the Vice President for Academic Affairs and Provost; or,

(2) The proposed research studies otherwise involve an invention or technology owned by the University or invented by a University employee or student.
This Code of Conduct establishes guidelines for professional conduct by those acting on behalf of the Medical University of South Carolina, its agents or affiliates (including but not limited to the Medical University Hospital Authority, MUSC Physicians, Carolina Family Care, the MUSC Foundation, and the Foundation for Research and Development hereafter, collectively referred to as "MUSC"), including executive officers, faculty, staff, and other individuals employed by MUSC using MUSC resources or facilities, and volunteers and representatives acting as agents of MUSC (hereafter collectively referred to as “employees”). This Code of Conduct is not an attempt to define everything one should and should not do, but to communicate MUSC’s expectations of proper conduct and what professional conduct MUSC values.

MUSC has the expectation of each employee to conduct all activities in compliance with all applicable laws and regulations and with the utmost ethical integrity. While the information that follows in this section is not all inclusive, it is indicative of important activities involving MUSC employees in their daily business and workplace operations.

Those acting on behalf of MUSC have a general duty to conduct themselves in a manner that will maintain and strengthen the public's trust and confidence in the integrity of MUSC and take no actions incompatible with their obligations to MUSC. Employees shall adhere to the applicable laws, rules, regulations and policies of governmental and institutional authorities. The failure to do so will be grounds for disciplinary action, up to and including termination of employment.

Employees are responsible for reporting any activity reasonably believed in violation of a law, rule, regulation and/or policy. This can be done through the employee’s chain of command, the Compliance Office, the Office of Internal Audit, or via the Confidential Hotline at 1-800-296-0269 (toll-free, available 24 hours a day, seven days a week). MUSC will neither discriminate nor retaliate against any employee who reports in good faith any instance of conduct that does not comply or appear to comply with laws, rules, regulations and/or policies.

**Ethical Standards**

South Carolina Code (S.C. Code § 8-13-10 et seq.) (the "Ethics Law") makes it unlawful for public officials, public members, and public employees to use their position to obtain an economic interest or to have a financial interest in most any contract or purchase connected with
MUSC/MUHA, unless certain exceptions apply. No provision of this policy supersedes the Ethics Law. The South Carolina Ethics Law can be found in its entirety at http://www.scstatehouse.gov/code/t08c013.php.

Some general ethical standards that apply to MUSC employees are:

- No employee shall accept or solicit any gift, favor, or service that might reasonably appear to influence the employee in the discharge of duties.
- No employee shall disclose confidential information or use such information for his or her personal benefit.
- No employee shall make personal investments that could reasonably be expected to create a conflict between the employee’s private interest and the public interest.
- No employee shall accept other outside or dual employment or compensation that could reasonably be expected to impair the employee’s independence of judgment in the performance of the employee’s public duties.
- Sexual misconduct and sexual harassment are unacceptable behaviors. This includes verbal or physical conduct of a sexual nature.
- No employee shall misrepresent themselves or the institution in any way. This includes, but is not limited to, clinical or research documentation, submission of claims for reimbursement, submission of timesheets, and advertising of services.

Standards of Conduct

The attached grid is intended to be a resource for employees in a number of areas that are considered “standards of conduct.” It is not considered an all-inclusive list of standards. The addendum will be periodically updated to reflect policy changes. Employees are responsible for ensuring they follow the most current policies.
### Addendum

**Code of Conduct**

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<th>Standard</th>
<th>MUSC Policy</th>
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<td><strong>Access to Facilities and Services.</strong> The University is committed to complying with the provisions of the Americans with Disabilities Act and providing equal employment opportunities and equal access to all Health Science Center facilities and services for those with disabilities.</td>
<td><a href="http://www.musc.edu/hrm2/policies/policy24.html">http://www.musc.edu/hrm2/policies/policy24.html</a></td>
<td><a href="http://mcrtranet.musc.edu/hr/documents/POlicy24-ADA.pdf">http://mcrtranet.musc.edu/hr/documents/POlicy24-ADA.pdf</a></td>
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<td><strong>Accuracy of Records.</strong> All records (medical, operational, financial, etc.) should be maintained in accordance with applicable laws and policies. No one may alter or falsify information on any record or document.</td>
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<td><a href="https://www.musc.edu/medcenter/policy/Med/A029.pdf">https://www.musc.edu/medcenter/policy/Med/A029.pdf</a></td>
<td><a href="http://mcrtranet.musc.edu/uma/compliance/C001.pdf">http://mcrtranet.musc.edu/uma/compliance/C001.pdf</a></td>
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<td><strong>Billing Compliance.</strong> All claims for reimbursement made by or on behalf of University’s physicians and other healthcare practitioners and services shall adhere to applicable laws, regulations, and University policies. The institution will follow all legal and regulatory guidelines for billing services. The University shall collect only those amounts to which the institution is entitled, and promptly refund amounts billed and/or collected in error.</td>
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<td><a href="https://www.musc.edu/medcenter/policy/Med/A088.pdf">https://www.musc.edu/medcenter/policy/Med/A088.pdf</a></td>
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<td><strong>Confidential Information.</strong> Confidential information about MUSC’s students, patients, employees, and operations must not be shared with others, inside or outside the institution, unless the individuals have a legitimate need to know. Confidential information shall be shared in accordance with applicable laws, regulations, policies, and procedures.</td>
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