# THESIS GUIDELINES

# SCHOOL OF HEALTH SCIENCES AND PRACTICE NEW YORK MEDICAL COLLEGE

Revised April 2011

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#### THESIS GUIDELINES

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#### **Guidelines for Preparation of the Masters of Public Health Thesis\***

#### A. Purpose of the Thesis

The preparation of the master's thesis provides the student with the opportunity to develop expertise in a selected public health topic through independent research and integration of skills acquired by the student through coursework. The thesis includes the formulation and articulation of one or more research questions, the development of methods to carry out the inquiry, and the results of the research. Some aspect of the research must be original, whether it is the topic itself or the reinterpretation of others' findings. While primarily a learning experience, the thesis should be of a quality and form that can be further refined for publication. As in every academic endeavor, the School of Health Sciences and Practice Honor Code as well as all college and library policies (including how to properly attribute the work of others) must be followed (see Attachment A).

#### **B.** Beginning to Think About the Thesis

The thesis is more than a long term paper. It requires a great deal of time for appropriate organization and development. Because the thesis follows from the student's academic experience, it is expected that through the thesis the student will demonstrate knowledge, understanding, synthesis and analysis of the chosen public health topic.

Students may choose to begin their thesis on completion or while still in the midst of their coursework. In the latter case, the thesis process should begin when there are 18 to 21 credits remaining (including thesis credits). In addition this process should begin 18 months before the expected graduation date, although the timing may vary depending upon the program (see Thesis Timetable). Since some students (depending on program) may participate in a capstone in lieu of a thesis, each student must discuss with their Department Chair/Program Advisor.

Students should not register for thesis credits until advised to do so by their Department Chair or Program Advisor. Before beginning work on the thesis, students should meet with their Department Chair/Program Advisor to share topic ideas and to "officially" begin the thesis writing process (discussed on p. 5).

\*Note: These guidelines apply to all MPH students in the School of Health Sciences and Practice who will be preparing an individual thesis and will not be participating in a capstone project. Certain requirements, such as the timetable for completing the thesis, will vary by program. Be sure to consult with your Thesis Advisor for specific instructions on all aspects of the thesis.

#### C. Types of Theses

There are several types of theses that may be undertaken. For some, the primary information usually comes from published documents such as peer-reviewed journal articles and books. For others, data are either collected specifically for the thesis project (primary data collection) or are obtained from a study or data collection effort conducted for a different project (secondary analysis). Regardless of which type of thesis is undertaken, the student should: choose a manageable topic in public health, review appropriate scholarly literature, utilize appropriate methods of investigation and analysis, and develop conclusions and recommendations. The student must use primary scholarly literature sources, including peer-reviewed journal articles, books, government reports and other scholarly information sources. Use of internet-based information from non-scholarly or non-government sources should be limited. The thesis must be written in a clear and logical style, using the thesis format described in this document (see pp. 9-16) and the reference format of the American Psychological Association (APA) (5<sup>th</sup> edition or later).

The five most common types of these are described below:

Public Health Policy Analysis - The student will identify and address a public health policy question through the synthesis of scholarly studies published in the literature. The policy analysis requires the student to identify many sources of scholarly information and to provide a balanced, objective, clear and organized discussion of the policy question. For such an analysis, students might identify a controversial issue, discuss the available evidence and opinions on both sides of the issue, and then explain and support with evidence why the student feels that one particular perspective has greater merit and should be considered by policymakers. Alternatively, students may conduct a systematic review or meta-synthesis in order to analyze or evaluate the evidence in support of the effectiveness of a particular intervention or the likelihood of a risk factor's importance in a public health issue.

Case Study of an Organization - The case study may examine in depth an organization or the structure of a health care institution, system or setting. The present status of the institution or setting may be analyzed with respect to the current "state of the art;" the implications of

introducing change or innovation may also be addressed. As in the analyses of public policy issues, information and data from documents, books, and organizational records, may be used to integrate the experience of others with the organization under review in the form of a "case study." In addition to documentary materials, case studies often involve in-depth interviews with key informants. In many instances, the case study may represent a microcosm of a public health issue. Along with critiquing the relevant aspects of a specific health institution or setting, the student is expected to address issues that include background information, the evaluative process, outcome measures, degrees of success and failure, and lessons learned.

**Study of a specific intervention or event** - An analysis of the effect of a particular intervention or public health event. The data utilized may be derived from data collected specifically for the study, or from other sources of data that reflect the impact of an intervention or event on health care.

**Research study with primary data collection** – This thesis type involves the development of research questions based on a thorough review of the literature in the topic area. The student then develops and implements a research study to collect data to directly address the research questions posed by the student in the thesis.

**Secondary data analysis -** An analysis of data that have already been collected by others. These data may be from publicly available national datasets or from other researchers who are willing to provide access to their data for secondary analysis. These data may be utilized to address new questions and/or to search for new information.

Students planning to collect and analyze their own data are expected to demonstrate to their advisor the skills and ability to complete the selected research. This includes a survey project in which persons will be interviewed or administered a questionnaire. Office of Research Administration approval is needed prior to any primary data collection. Students who plan to use data collected as part of another investigator's research must obtain written permission of the principal investigator and other appropriate parties.

#### D. Supervision of the Thesis

Following consultation with the student and approval of the thesis topic, the Department Chair/Advisor will identify the faculty member or outside expert most appropriate to serve as the Thesis Advisor. In general, the Thesis Advisor has primary responsibility for working with the student. The Department Chair/Advisor will be advised of the progress being made on each thesis, and may become involved if the student changes the subject of the thesis. The Thesis Advisor may, in turn, suggest a Reader with specific content expertise to read, review, and comment on the thesis. Although the Thesis Advisor will remain the key faculty member for the student, the Reader may make suggestions to the student directly, or offer comments to the Advisor. The Thesis Advisor and Reader jointly recommend to the Department Chair a grade of Pass, Fail or Honors for the thesis; if they are unable to agree, the Department Chair will mediate or appoint an additional Reader.

While the Thesis Advisor is the main source of guidance for the student's thesis, it is the student who is responsible to follow the process that is mutually agreed to by student and Advisor. This process includes: final selection of the thesis topic; establishing the methodological approach to be used for the thesis; developing a work plan; and reviewing the work process, thesis drafts and revisions through to the final copy that is forwarded to the Dean's Office.

During this process, the student should: pursue suggestions made by the Advisor or Reader; report back on a timely basis; follow the work plan and report progress; and review all work before it is submitted, including early drafts. All drafts should be dated and formatted in clean thesis format, with references cited using APA style, even if the thesis is not complete.

The student should remain in touch with the Thesis Advisor even if new progress on the thesis or a new manuscript draft is not immediately anticipated. This will enable the advisor to be aware of the student's current status and to deter long delays in student communication that could be perceived as a signal that the student has temporarily "dropped out" and may affect the student's ability to graduate within the anticipated time.

#### E. The Process of Writing a Thesis

The process of writing a thesis should parallel that of writing a professional report, paper, or article. Seldom are these activities begun or completed without the advice and involvement of others, and never without advance planning, design, and preparation. Initial ideas for a thesis are discussed with the Department Chair/Advisor, and the method of proceeding agreed upon by both the Chair/Advisor and Thesis Advisor. The proposed idea becomes formalized into a plan for collecting information and writing that enables all to assess progress being made while avoiding time consuming digressions. Poor communication or failure to follow an orderly process may result in the rejection of a late thesis draft that does not conform to the original thesis concept. Accordingly, the initial development of the thesis must follow a clear process and series of stages.

#### 1. Overview

Thesis Topic Selection - The first stage begins with the student's identification of the public health problem or issue that will be addressed, what question(s) will be asked by the student and how it(they) will be addressed in the thesis. This information is developed into a short document called the Thesis Topic Selection. This document should be provided to and discussed with the Department Chair/Advisor. On the basis of the Thesis Topic Selection, the Department Chair/Advisor chooses the Thesis Advisor who will work with the student from that point on, or who might aid in the redevelopment of the Thesis Topic Selection, if further refinement is required.

**Thesis Proposal and Plan** - With approval of the **Thesis Topic Selection** by both the Thesis Advisor and the Department Chair/Advisor, the student is prepared to plan the thesis with the Thesis Advisor. This plan is presented in a **Thesis Proposal and Plan**, which is stage two of the process. This document constitutes an expansion of the Introduction and Methods sections of the **Thesis Topic Selection**.

#### 2. Thesis Topic Selection (Stage One)

To facilitate discussion with the Thesis Advisor, the student develops the **Thesis Topic Selection**. This is a two-to-four page description of the topic using APA style, which must be approved by the Thesis Advisor and Department Chair/Advisor before the student may proceed (see Attachment B for approval form).

The **Thesis Topic Selection** consists of two sections of text and a list of references:

#### Introduction

- a. A descriptive statement of the public health topic, including incidence/prevalence and importance of the topic for public health;
- b. A statement of the relevance and public health consequences of the topic (based upon appropriate literature);
- c. A statement of the purpose of the study and the research questions to be addressed

#### **Methods**

- a. A description of the research approach to be taken, including what type of thesis (as described above);
- b. A tentative list of the sources of information that will be used (literature, interviews, data sets, etc.).

References – a list of references cited in the text and presented in APA format

The student and Department Chair/Program Advisor will jointly decide on an appropriate topic, based primarily on interests, faculty expertise, and feasibility. Ideas for topics frequently stem from work experiences, coursework, fieldwork and/or independent reading. Deciding on the research question (e.g., is there an association between x and y?) and finding appropriate data or resources to answer it is perhaps the most daunting aspect of the thesis project. The research question need not be original; a previously formulated question can be asked using new data. Students having difficulty deciding on a topic are encouraged to discuss this with their Department Chair/Program Advisor.

#### 3. Thesis Proposal and Plan (Stage Two)

The next step is to develop a full **Thesis Proposal and Plan**. This is greater in length than the **Thesis Topic Selection**, (generally 10 to 12 pages), as it goes into greater detail and depth of the selected topic. It is an expansion of the two sections of the Thesis Topic Selection and the addition of a new section – Literature Review (see Attachment C for approval form). The **Thesis Proposal and Plan** must be written in a structured format using APA style and must contain:

#### Introduction

- a. A descriptive statement of the public health topic and specific aspect of the problem to be addressed, including incidence/prevalence and importance of the topic for public health;
- b. A statement of the relevance and public health consequences of the topic (based upon appropriate literature);
- c. A statement of the purpose of the study and the research questions to be addressed

#### Literature Review

- a. A summary of the literature providing background information;
- b. Describe possible gaps in the literature and support for the chosen topic

#### Methods

- a. A description of the research approach to be taken, including what type of thesis (as described above);
- b. Policy paper/Case study A proposed list of the sources of information that will be used (literature, interviews);
- c. Primary/Secondary analyses or Intervention study Methods section must include the following subheadings: Study design, Participants, Measures, Procedures, Data analysis.

References – a list of references cited in the text and presented in APA format

#### F. Health Sciences Library Thesis Support Resources

The Health Sciences Library has developed a suite of resources for students writing theses. First, the library maintains a collection of honors theses for the School of Health Sciences and Practice that are cataloged by author in the library's online catalog at: <a href="http://library.nymc.edu">http://library.nymc.edu</a>. Students may search by "Subject" under the heading: Dissertations, Academic. For theses received by the library since 1991, all title pages have been photocopied, organized by program, and placed in a loose-leaf binder, which is available onsite at the Reference desk. Students wishing to scan thesis titles can get ideas from past examples. The Library also has developed web pages under

Resources: Curricular Resources, then grouped: General, then by school. This site contains this Thesis Guide, other thesis information and some specific program links.

#### **G.** Planning and Writing the Thesis

Activities in this stage of thesis preparation should follow a plan that is mutually agreed to by both student and Thesis Advisor. They should agree on how progress of the thesis will be determined, the frequency and method of contact between student and Advisor, and the timing of these contacts whether based on stages of thesis completion or specific time intervals. They may agree to review the thesis with the completion of specific section drafts, for example. It is urged that at each major step in the thesis preparation there be discussions. Both student and Advisor should relate these discussions to what was agreed to in the **Thesis Proposal and Plan**. If this plan requires modification, it should be done together. The student should not change the thesis topic or method without informing the Advisor.

Whatever the plan agreed to, timely graduation requires that both student and Advisor adhere to the timetable established by the Dean's Office. The end point is **April 1**<sup>st</sup> when an approved and graded copy of the thesis must be in the Dean's Office for a May commencement - the only commencement each year.

#### 1. Thesis Timetable

Thesis planning and completion will take about 18 months from the time that formal approval has been made of the **Thesis Topic Selection** by the Department Chair/Advisor. To enable students to plan timely completion, a suggested timetable is presented below that assumes that the topic has been discussed during the fall months and approved by the end of the first year after initiating the thesis process.

THESIS PROCESS

TIME COMPLETION

Consideration of thesis topic October (calendar year 1)

Approval of Thesis Topic Selection December (calendar year 1)

by Program Director

Approval of Thesis Proposal and Plan March (calendar year 2)

by Thesis Advisor

Draft of completed thesis to Thesis Advisor December (calendar year 2)

Semi-final draft to Thesis Advisor and Reader March 1 (calendar year 3)

Final copy to Dean's Office April 1 (calendar year 3)

#### 2. Thesis Format

The thesis must follow the style of the American Psychological Association as provided in the 5th edition (or later) of the *Publication Manual of the American Psychological Association*. Copies of this style guide are available in the campus library and bookstore. Quick guidelines to the APA format can be found on the Curricular Resources page for the Health Sciences Library noted above or can be purchased at Barnes & Noble (SparkCharts *Research Style & Usage APA/MLA* by Spark Educational Publishing).

#### 3. Thesis Components

#### **Title Page**

The title should be a concise summary of the thesis topic. Although its function is to inform the reader about the thesis, the title also serves as a statement of article content for abstracting and information services. Since titles commonly are indexed and compiled in reference works, avoid words that serve no useful purpose. The words "methods" and "results" do not normally appear; nor do the phrases "a study of …" and "an experimental investigation of…" which are implicit.

The form of the title page is provided in Attachment D. The page should contain the student's full legal name, the title of the thesis, and the year in which the degree will be conferred.

#### **Thesis Approval Form**

The form of the approval page is presented in Attachment E. Information includes the title of the thesis, the student's name, and lined spaces for approval signatures and dates of acceptance. The names of the Thesis Advisor, Reader, Department Chair/Program Advisor and Vice-Dean should be typed below the signature lines.

#### Abstract

The abstract gives a concise summary of the thesis in a **maximum of 250 words**. The abstract should briefly describe four components: statement of the problem, methods, results, and conclusions.

#### **Acknowledgment Page**

A page of acknowledgments is not required; however, it offers an opportunity to express thanks to family, faculty as well as other people who have been helpful, and to give credit to authors and publishers of materials used, or those who provided access to study participants in a primary data collection.

#### **Table of Contents**

The Table of Contents lists all sections including prefatory pages (i.e., Abstract, Acknowledgements, Table of Contents, List of Tables, List of Figures) and **every heading**, whether major or minor, in exactly the words that appear in the body of the document. This page is usually typed with double spacing, except for headings that would be split between two pages. An exceptionally long Table of Contents may be single-spaced with subordinate headings given graduated indentations. Page numbers are given at the right side of the page, each following a line of dots from the titles and headings. If Tables and/or Figures are included in the document, a List of Tables and/or List of Figures should follow the Table of Contents and conform to the same style.

#### **Text**

The text opens with an Introduction section, followed by sections devoted to Literature Review, Methods, Results, and Discussion. The text should be written using an objective and professional style, while refraining from hyperbole. Except in cases where the student is critiquing the methods of a published study, the student's opinions should be reserved for the Discussion section and not appear in any other section of the thesis. The student should follow the format cited in the 5th edition (or later) of the <u>Publication Manual of the American Psychological Association.</u> All citations in the text to the literature reviewed should follow the format as described in the APA Style Manual.

#### 4. <u>Sections of the Thesis</u>

#### A. Introduction

The introduction presents the public health problem/topic under study. It should logically orient the reader by conveying a clear sense of the content of the thesis, including not only what was done, but also why the thesis topic is important (Background and Context). For example, the significance of the subject being studied may be identified by statements about the magnitude of a problem relative to prevalence, epidemiology, costs, or historical importance. Statements regarding the importance of the problem should be supported by appropriate literature. Communication to the reader will be aided by the insertion on the first or second page of a sentence that begins "This study is about . . ." or "This study examines the question of...."

#### **B.** Literature Review

The supporting literature serves as the basis for the thesis, providing background to the study, the current state of the art of a thesis topic, or the theoretical rationale for a study. It demonstrates the logical continuity between previous work and the work being addressed in the thesis. The literature cited should include peer-reviewed published material, documents from professional and primary sources, and in some cases, written or oral personal communications that are important to this work. The literature cited should bear directly on the core of the thesis. This might include literature relevant to the substantive subject area, or methodological references in support of statistical tests used. The references should emphasize applicable methodological issues, relevant findings and major conclusions. The literature review should suggest how the findings of others may have influenced the thesis research and where the thesis fits in with the earlier work of others. The thesis reader should have enough information in the literature review to be able to decide if the study is really

worth considering for purposes of policy decisions. Citations in the text should follow the format as described in the APA Style Manual.

#### C. Methodology

This section describes in detail how the study was conducted. If the study is based on experience in a particular health care setting or geographic area, the setting should be described. Primary/secondary analyses or intervention studies should include information on the population from which the sample was drawn, how it was decided to study this group and not others, the variables used in the study (e.g., age, sex, time period under study), how data were collected, and the statistical tests used (Study Design, Participants, Procedures, Data Analysis). Studies relying on other data sources, such as those relying on documents, books, journal articles, and information from a case study, should state clearly why these and not others were selected, and the basis for their selection. The methodology should enable subsequent researchers to duplicate this study. If someone else's data set is used, the methods described for collection need to be summarized in this section.

#### D. Results and Findings

If primary or secondary data have been analyzed, this section summarizes the data and the findings of the statistical analyses. The data should be organized into statistical tables that are clearly labeled. The text of the results section should be based on a conceptual link between the data collected and the analysis, so that data are relevant to the research questions being asked. Therefore, the text should refer to the data provided in the accompanying tables, and should offer the major findings and meaning of those findings, rather than merely restating what is found in the tables. A discussion of the results in relation to past findings or in terms of their contribution should be reserved for the discussion section.

In a health policy analysis or case study, the findings come from the documents, articles, papers, and studies that serve as information sources of the issues under study. They should be organized and reviewed logically so that a discussion can be traced through this section. In the case of a systematic review or meta-synthesis, the studies reviewed which are used as evidence to support the importance of a risk factor or the effectiveness of an intervention

should be organized along with key elements from the studies into comparative tables which should be described in this section.

Tables and Figures themselves should be placed after the text immediately *following* the list of references. They are to be listed by number and title in the List of Tables and List of Figures (see below). They are each numbered sequentially in the order that they are referred to in the text.

#### E. Discussion

This section interprets the relevance of the results of a study to the broader public health context. The discussion section should summarize the key findings and explain their relevance by comparing the findings to other published work. For this section it is often useful to refer back to the Introduction and Literature Review to enable the reader to observe how the purpose of the thesis was accomplished (e.g., did your results support your original hypothesis?). For example, the thesis may confirm the work of others; it may provide a small or large step in the understanding of an issue, or it may show that an experiment or intervention has an effect on a particular variable. Each of these is a legitimate and useful result.

A section describing the limitations of the student's project vis a vis how they might impact the findings and how the study, given the appropriate time and resources, might be improved by others. This may include, for example, a discussion of the thesis limitations placed by constraints in the student's resources or perhaps decisions made in planning the thesis. These insights are often useful to other researchers.. Finally the discussion should describe the implications of the findings and how the thesis work has contributed to public health. This should include recommendations for what steps should be taken in the future.

#### F. References

A complete list of all material referenced in the thesis must be included. This would be formatted according to the APA style and listed in alphabetical order by author's last name.

#### G. Appendix

Although not required in every thesis, an appendix (or appendices if more than one) provides an appropriate format indicating the available auxiliary materials (e.g. data collection form, interview questionnaire). If an appendix is used, its form should follow the standards presented in the *Publication Manual of the American Psychological Association*.

#### 5. Thesis Production: General Considerations

#### **Paper**

Good quality white bond paper must be used for the entire thesis. No holes should be punched in the paper.

#### **Print**

The thesis must be clear, legible, and conform to the following requirements: 1) the height of the letters must not be smaller than 12 point; 2) type density must be no more than 15 characters per square inch; however, figures, charts, tables and figure legends may be smaller in size, as long as they are legible.

#### **Spacing and Margins**

All straight text should be double-spaced. However, quotations, footnotes, titles, table headings, figure captions and references should be single-spaced. Minimum margins of one inch on both sides and on the top and bottom of the pages must be used throughout the thesis.

#### **Pagination**

All pages of the thesis must be counted and assigned a number, including prefatory material (e.g., acknowledgments, table of contents) and graphs, charts, tables and appendices. The prefatory pages are to be numbered with small Roman numerals, centered at the bottom of the page. Although the title page counts as page i, the number does not appear; the other prefatory pages are numbered ii, iii, iv, etc. The remainder of the text should be numbered consecutively in Arabic numerals placed on the upper right corner of the page. The first page of the Introduction is page 1, but the number does not appear.

#### Reproduction

Photocopy is the only acceptable method for reproducing pages.

#### **Quotations**

Quotations must be completely accurate and reproduce the exact words, spelling and punctuation of the original, even if they are faulty. A short quotation, which occupies two lines or less of typescript, should be incorporated in the text and set off by quotation marks. A quotation of three or more typewritten lines should be typed in block style with single spacing. All lines are indented five spaces, and the first lines of paragraphs within such quotations receive an additional three spaces of indentation. **Quotation marks are not used at the beginning and end of blocked quotations**. The reference citation of each quotation must state the exact page or pages quoted.

The order of quotation marks in relation to other punctuation is often troublesome, so a summary of the rules may be helpful. In standard American practice, a comma or period precedes the closing quotation mark **under all circumstances** even if only one word is quoted; a colon or semicolon usually follows the quotation mark; a question mark follows a quotation mark unless the question is part of the material quoted. (For more information on quotations, see the *Publication Manual of the American Psychological Association*).

#### References

Reference citations lead the reader to the sources of scholarly material mentioned or quoted in a document for the purpose of verifying the author's statement and/or learning more about the topic. References should be as current as possible and completely accurate. All citations should be checked with the original source and with the reference listing to ensure they are accurate in every detail. A discussion of how to cite references in the thesis is in the *Publication Manual of the American Psychological Association*. All citations in the text must be included in the reference list and all items in the reference list must be cited in the text.

Electronic correspondence, including e-mail and discussions on bulletin boards and discussion groups, are regarded by the APA as personal communications (like phone

conversations and memos) because they are not recoverable by others. Personal communications are cited only within the text and not in the reference list.

#### **Tables, Figures, Charts and Illustrations**

Tables and Figures must have one-inch margins for pages of text. They are numbered consecutively throughout the thesis in the order that they are referred to. Tables are presented by number, title and page in the List of Tables in the prefatory section. Figures are treated similarly in a List of Figures. Larger tables and charts may be typed full size and then reduced by a photo duplication process to the standard size paper. Charts should be in black and white whenever possible. Cross-hatching can effectively be used in place of color. It is generally better to use more rather than fewer tables. If the thesis has *one or two small tables*, they may be included in the results section; otherwise *all Tables and Figures should be placed immediately following the list of references*. Tables included in the text should be presented close to where they are discussed in the text.

#### Other Questions on Style

Consult the *Publication Manual of the American Psychological Association* for guidelines on punctuation, spelling, capitalization, italics, and abbreviations. In all areas where the APA manual differs from this Thesis Manual, precedence should go to the APA manual.

#### 6. <u>Submission of Thesis</u>

Students should submit one copy of the completed thesis to their Thesis Advisor. A **Thesis Approval Form** (Attachment E) should be attached to the outside cover of the thesis. The Thesis Advisor in discussion with the Reader will recommend to the Chair of the Department a grade of Pass, Fail or Honors. The Chair will review the thesis and grade and if in agreement will forward the thesis to the Dean's office. If the Department Chair has any questions he/she will discuss them with the Thesis Advisor.

#### Student Code of Academic Integrity and Professionalism

Approved December 15, 2010

#### I. Purpose

Academic integrity and respect for the dignity of the individual are essential in any educational endeavor. In scholarly endeavors, all participants must commit themselves to truthfulness and honesty in the search for new insight and knowledge. In addition, honesty, integrity and respect in all interactions with colleagues, peers, teachers and support staff, as well as with patients and their families, are essential professional attributes.

As a community devoted to the health sciences, professionalism is a core value. The attitudes and behaviors described by the term professionalism serve as the foundation of the expectations that society has of us as members of the medical and health sciences community. Therefore, as professionals, practitioners, scientists and students, we value attitudes, behaviors and habits expected of professionals – e.g., commitments to high standards of competence and performance; integrity, honesty and ethical behavior; respect for all individuals regardless of gender, sexual orientation, race, religion, age, national origin, marital status, veteran status, disability, or occupation or level of training; meeting responsibilities and commitments; excellent communication skills, reflecting behaviors expected of professionals; maintaining appropriate relations with patients, colleagues and others; managing conflicts of interest; continuous self-improvement; and honoring the trust that is placed in us by society.

By accepting admission to New York Medical College, students commit to the ideals, ethics and appropriate conduct of their chosen profession.

[NOTE: All NYMC policies referenced in this document will be available at <a href="http://www.nymc.edu/UniversityPolicies/">http://www.nymc.edu/UniversityPolicies/</a>]

#### II. General Responsibilities

All faculty and students at NYMC are responsible for maintaining an atmosphere of honest inquiry, academic integrity and professionalism. All should be familiar with the provisions of this Code. All should strive to conduct themselves and their academic and scholarly activities within the spirit of the highest traditions of truthfulness, integrity, and respect for the rights of others. They should refrain from any action violating the principles of the Code, whether in letter or in spirit.

Each student is responsible for the content and the integrity of all work performed or documents submitted, including but not limited to examinations, papers, laboratory work, clinical rotations, practicum work products and scientific and scholarly publications. Similarly, each student has the responsibility to adhere to the principle that students and teachers have a duty to respect each other and promote a professional environment in which the educational, research and clinical missions of the university are pursued.

A student should never engage in any act of academic or professional misconduct, as described below. Examples of misconduct are provided below to assist in understanding the various types of behaviors that violate this Code. They should not be interpreted as all inclusive. That is, misconduct is not limited to the examples provided.

#### **III.** Misconduct: Definitions and Examples

#### A. Plagiarism.

Plagiarism is derived from the Latin word meaning to "kidnap". In modern terms, it is more analogous to "theft". A more formal definition employed for purposes of federal research grants is the "...appropriation of another person's ideas, processes, results, or words without giving appropriate credit" 42 CFR §93.103(c). In other words, if you present someone else's work as your own, you are stealing from that person and, in academic circles, this is a very serious violation of the principles of academic integrity, respect for others, and professionalism. This definition applies regardless of the medium from which you plagiarize and whether or not the source of the copied material is itself copyrighted.

Plagiarism takes many forms. Flagrant forms include but are not limited to purchasing or copying a paper from the internet or from a fellow student or anyone else, whether or not that paper is published; copying or cutting and pasting portions of others' work (whether a phrase, sentence, paragraph, chart, picture, figure, method or approach, experimental results, statistics, etc.) without attribution; copying clinical notes/materials without personally performing the patient examination. A more subtle, but equally flagrant, form is paraphrasing or attempting to put in your own words the theories, opinions or ideas of another without proper citation. Carelessly, inadequately or inaccurately using citations is also a form of plagiarism. Fabricating citations is a very serious form and may also be considered fraudulent behavior. Re-using your own previous work without appropriate citation is a form of plagiarism, and may mislead the reader into believing that what you are currently writing or reporting is new work. Even inappropriately assuming that a fact or idea is common knowledge and, therefore, not providing a citation might be viewed as plagiarism and should be avoided.

Proper use and citation of resources is essential in all scholarly work. A class assignment, paper or thesis represents a scholarly endeavor, whether or not your work is to be "published." As such, the quality and integrity of these documents will be held to a professional standard.

#### **B.** Cheating

Generally, cheating is defined as improperly obtaining and/or using unauthorized information or materials to gain an advantage on work submitted for evaluation. Providing such unauthorized assistance to others is also cheating.

Examples of cheating include, but are not limited to: giving or receiving unauthorized assistance to or from another on quizzes, examinations, or assignments; using materials or devices not specifically authorized during any form of a test or examination; exceeding the restrictions put in place for "take home" examinations, such as unauthorized use of library sources, intranet or internet sources, or unauthorized collaboration on answers; sitting in for someone else or permitting someone to sit in for you on any form of test or examination; working on any form of test or examination beyond the allotted time; hiding, stealing or destroying materials needed by other students; and altering and resubmitting for re-grading any assignment, test or examination.

#### C. Misleading or Fraudulent Behavior

Misleading or fraudulent behavior, put simply, is lying and includes acts contributing to or associated with lying. It takes on any form of fabrication, falsification or misrepresentation.

Examples include, but are not limited to: making up information, data or research results; altering or manipulating information, clinical or laboratory records, practicum experiences, research results/equipment/processes; reporting such false information to gain an advantage; omitting information or data that results in misrepresenting or distorting findings or conclusions; providing false information to explain lateness or to be excused from an assignment, class or clerkship function; falsely accusing another of misbehavior or otherwise misrepresenting information about another. Providing false information about yourself, such as on an application or as part of some competition is an example of fraud, as is taking credit for accomplishments that you did not perform and, therefore, properly belongs to others. Sometimes, particularly in the case of research and other scholarly endeavors, it may be misleading *not* to provide information about yourself, such as possible conflicts of interest in which you stand to gain financially by the results of your work.

#### D. Research Misconduct

The integrity of the scientific enterprise, in general and at this institution, requires adherence to the highest ethical standards in the conduct of research and research training. Students and other trainees conducting research, therefore, are bound by the same ethical guidelines that apply to faculty investigators. These standards are described briefly in the New York Medical College Guidelines for Ethical Practices in Research and Policies for Dealing With Instances of Alleged Violations of Ethical Standards and more fully in the US Public Health Service Policies on Research Misconduct. <sup>1</sup> Research misconduct is defined in the USPHS Policy as "fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results." <sup>2</sup>

Fabrication means making up data or pretending to have performed experiments that were not, in fact, conducted. Falsification means inappropriately manipulating data or images so that, for example, one possible conclusion or interpretation is favored over another. Plagiarism is dealt with elsewhere in this document, but may additionally constitute *research misconduct* if it is committed in the context of a research effort. Other related unethical behaviors, such as stealing credit for research accomplishments, misappropriation of research funds, or failure to disclose significant conflicts of interest may be more properly classified as fraudulent behavior.

Allegations of research misconduct must be evaluated and, if appropriate, adjudicated by specific procedures described in the College's **Guidelines for Ethical Practices in Research** cited above.

#### E. Failure to Abide by Standards of Professional Behavior

Professionalism standards preclude any behavior that may be perceived as injurious to the mental or physical well-being of another or to the academic freedom of any student. Students are expected to be familiar with and to adhere to specific standards of behavior prescribed by pertinent professional/accrediting organizations, as well as standards prescribed by NYMC. Among such university policies and guidelines are Sexual Harassment Policy, Smoke-Free Policy and the Policy on Professional Conduct in Student-Student and Teacher-Student Relations.

An overriding principal of professional conduct is to treat others (whether colleagues, peers, patients, faculty, staff or students) with the same respect and dignity you would wish them to show you. Among behaviors that violate these codes or standards are: making "unwelcome sexual advances, requests for sexual favors and other physical, verbal or visual conduct based on

sex ... include[ing] explicit sexual propositions, sexual innuendoes, suggestive comments, sexually oriented practical jokes, or obscene language or gestures"; physically, verbally or psychologically harassing others; discriminating against another based on gender, sexual orientation, race, religion, age, national origin, marital status, veteran status, disability or occupation or level of training; taking without permission or damaging another's property; not being truthful and honest in all communications with colleagues and patients, including not acknowledging errors of omission or commission; using offensive language; failing to maintain the highest level of confidentiality on matters relating to colleagues, students and patients; failing to obtain appropriate consent from patients/clients prior to any photographing, videotaping, or other visual recording; violating any local, state or federal law or regulation. Although students retain basic rights to free speech and to offer legitimate criticisms of other members of the university community in proper contexts and forums, it is inappropriate to breach confidentiality, invade another's privacy, or to belittle or demean others in a seriously hurtful manner (including cyberbullying), whether in or out of their presence, whether on- or offcampus, whether in the real or virtual world (e.g., various web sites, blogs, social networks and media, etc.). Additionally, failing to dress in appropriate, professional attire is a sign of disrespect of others and is a violation of this Code.

Students should expect to be treated in a professional manner, consistent with this Code. Examples of behavior that violate this principle are being required or asked to perform personal services by one's supervisors; or being assessed or graded in a punitive manner (other than under the terms of this Code).

#### F. Inebriation

Inebriation means being under the influence of any substance that impairs your ability to function. It is a violation of the Code of Academic Integrity and Professionalism and the University's Policy on Drug-Free School and Campus to appear in class, in a laboratory, at a practicum or clinical rotation site, in the library or any other public site on campus or otherwise related to NYMC while impaired by any legal or illegal substance.

#### G. Failure to Attend Required Course/Clerkship Functions or other Clinical Assignments

It is the responsibility of each student to be familiar with and adhere to the attendance/absence policy of her/his school within NYMC.

In general, each student must attend all academic activities scheduled for each course or clerkship, as specified by the instructor, course director, clerkship director, director of clinical education, or research supervisor. Anticipated absences should be arranged in advance with the appropriate instructor, course or clerkship director. Lack of attendance for any reason does not relieve the student of responsibility for the material covered during her/his absence. Students may be required to make-up the time missed. Repeated absences, whether or not approved, may result in one or more of the outcomes listed below.

#### H. Violating University Policies and Guidelines on Electronic Communications

It is a violation of this code to fail to adhere to the practices prescribed by the Health Sciences Library, academic departments and the administration which expand on this Code. Among the specific policies incorporated into this Code of Academic Integrity and Professionalism are the university's Health Sciences Library's Policy on Attributing Works of Others and the university's Electronic Communications Policy Statement.

Examples of email behaviors that violate this Code are: forging other users' email or attempting to read another's email; sending harassing, obscene or threatening email messages to others; sending via email copyrighted materials not within fair use guidelines or without prior permissions from the author or publisher; deleting, copying or unauthorized posting files (excluding those on the X: drive) on university's network.

### I. Violating rules, policies or procedures of affiliated institutions or clinical/ practicum sites.

New York Medical College students and faculty are expected to know and abide by such rules, policies and procedures as are applicable to them at any site.

Examples of such rules, policies and procedures include HIPAA and other protections of confidentiality, building access, computer use, and appropriate professional codes (Standard of Ethics).

#### J. Failure to report an infraction

Any alleged violations of this Code of Academic Integrity and Professionalism must be reported in a timely manner to the appropriate program/course/clerkship director, department chair, or Dean. Failure to report a violation is itself a violation of the Code.

#### IV. Outcomes

While this Code applies to all students in each of the College's schools, each school has its own procedures for addressing potential and actual violations of this Code. Thus, any act in violation of this Code or any allegation of misconduct related to this Code involving a student is to be reported and addressed in accordance with the procedures of the student's school.

An act of academic misconduct will have consequences. Depending on the specific nature and circumstances of one's behavior <u>and in accordance with the rules, regulations and procedures of each school within New York Medical College</u>, a student who is found to have violated the Code of Academic Integrity and Professionalism may be subject to one or more of the following:

- Taking additional course(s) intended to assist the student in avoiding future misconduct.
- Redoing the work, up to and including repeating the entire class/clerkship.
- Reduction in grade on a particular submitted piece of work, segment of work required for a course/clerkship or the entire course/clerkship down to and including a failing grade.
- Indication of the disciplinary action in reference letters, licensure forms, etc.
- Limitation or revocation, either temporarily or permanently, of certain privileges, such as use of campus email or library access.
- Notification to an appropriate external agency, such as a regulatory body or accrediting agency.
- Notification of the violation to the other schools within the university
- Suspension
- Expulsion/dismissal
- Revocation of one's degree, where the violation is identified after graduation.

Other sanctions may be imposed, as deemed appropriate.

## Procedures for Addressing Violations of the Student Code of Academic Integrity and Professionalism

#### **Procedures**

The procedures described below are to be followed by all students and faculty in the event of a suspected or alleged violation of the Code of Academic Integrity. Subsequent to notification of an alleged/suspected violation of this code, email between the parties may not be used to communicate official matters related to these proceedings. While an Honor Code matter is pending, the student shall receive an 'INC' grade and/or not be awarded her/his degree.

#### **Notification**

Prompt notification of the suspected or alleged violation of the Code to the chair/program director is required. This notification must be specific as to the identity of the accused, the nature of the violation, and to the extent possible the evidence of misbehavior. While it is preferable that this notification be in writing, it is not required. No accusation made anonymously will be pursued. All communication regarding alleged infractions will remain confidential.

#### **Initial Investigation**

Within five business days of notification, the chair/program director will inform the vice dean and, if necessary, review the procedures to be followed and any prior history of Code violations by the accused student. If the matter would clearly warrant suspension or worse, the vice dean should initiate the formal hearing process immediately (see below).

Unless the accusation clearly warrants suspension or worse, the chair/program director should discuss the situation with the instructor. The chair/program director should arrange a meeting with the accused student (and with the instructor, if appropriate) to attempt to resolve the matter. This process should not take more than 10 business days. At this meeting, the student should be informed of the accusation and shown a copy of the procedures to be followed, as laid out in the Code of Academic Integrity. The student should be given the option of:

- continuing the discussion at present or
- bringing the matter up before the hearing committee (see below).

If the student wishes to continue, s/he should be shown evidence in hand and asked for his/her response and any additional information/evidence that is pertinent. The chair/program director should determine and inform the accused student of the appropriate action to be taken. Implications of this action should also be reviewed with the student – e.g., if the course is to be graded 'F', how this impacts her/his academic standing. If the student challenges the chair's/program director's determination and resolution, the matter should be referred to the hearing committee.

Within five business days following this discussion, the chair/program director reports the outcome to the vice dean. If the matter is resolved at this stage, the chair/program director prepares a draft letter to the student for review by the vice dean. The letter will detail the accusation, the process followed, the agreed upon resolution, and the student's right to appeal. The approved letter will be sent to the student and a copy retained by the vice dean.

#### Hearing

If the accused misconduct warrants suspension or worse, or if the student prefers a more formal process, or if the student does not accept the chair's/program director's resolution, the vice dean will appoint a hearing committee within five business days of determination of

need. This committee is to be composed of two students (one from the evening program and one from SLP or PT) and three independent faculty members, one of whom shall be the chair of the committee. The chair of the committee, within five days of appointment, should send a letter to the student describing the process to date (i.e., how the matter came to the committee), the procedures to be followed, including the student's rights, and the date of a hearing. The hearing date should be not less than 10 or more than 20 business days from the post mark date of the letter.

The hearing committee will proceed with its investigation of the process to date and obtain any additional information it needs (witnesses, advice, documentation). It will hold a hearing at which this information is reviewed with the student. The student will be given the opportunity to make a statement. The student may be accompanied by a representative or advisor, but this representative/advisor may not address the committee or any witnesses. This hearing should be viewed as an opportunity for further fact-finding and clarification.

After the hearing, the committee has 5 business days to deliberate and agree on a resolution. At the end of this period, the committee prepares a draft letter for review by the vice dean detailing the hearing process, the committee's findings, the action recommended, and, if appropriate, the student's right to appeal. The approved letter is sent to the student not later than 10 business days after the conclusion of the hearing. A copy of the letter and all supporting documentation is retained by the vice dean.

#### **Appeal**

Any appeal of the outcome of the initial investigation or the hearing committee's decision should be directed to the vice dean and must be post-marked no later than 15 business days after the date of the letter from the chair/program director or the hearing committee. The appeal must be in writing and must detail the bases for challenging the finding of facts and/or the sanctions imposed. The vice dean and an independent department chair will review all material and, if they determine it is necessary, request/grant an interview with the student (and his/her representative/advisor), seeking additional statements and clarification. This meeting, if needed, should occur within 15 business days of the date of the appeal letter. If new evidence is presented, the vice dean should refer the matter back to the hearing committee. Otherwise, the vice dean with the aid of the independent department chair should present their findings and recommendation to the Dean. Upon the Dean's acceptance of the findings/recommendations, the Dean notifies the student on the outcome of the appeal. Resolution of the appeal should occur within 20 days of the appeal letter or, if needed, the appeal meeting. This resolution is final.

#### Health Sciences Library – New York Medical College

#### **Policy on Attributing Works of Others**

Respecting the expression of ideas and works of others is basic to the scholarly process and educational mission of New York Medical College (NYMC). Part of the value of your degree lies in adhering to standards of honor and integrity. Academic honesty requires that all of your writing presents your own phrasing, regardless of the format or presentation; and copying of the words or ideas of other authors must be carefully attributed and documented as to the specific sources. Students are expected to demonstrate applied knowledge of the *copyright* law, respect the intellectual property of others, and understand when and how to use them.<sup>1</sup>

The Health Sciences Library (HSL) provides both electronic and collections of licensed or copyrighted content from database producers, journal publishers, and other providers. These works are licensed for use by NYMC faculty, students, employees, residents, or fellows; access privileges are not transferable. Use of published or unpublished materials from the Internet by students requires the *same rigor* that print or other content requires. Unlawful use of protected or copyrighted content may legally jeopardize access to these materials by the entire NYMC community. Therefore, any student found to be unlawfully copying, downloading or transferring copyrighted works is subject to *immediate suspension* of access and all library privileges and services until the issue is addressed through the appropriate University processes.

*Copyright* is a term that describes the legal right of authors to exclusively control the communication, copying and/or distribution of their work and to collect royalties when they are used by others. <sup>1-2</sup> The law protects authors' words, images, music, or data. Authors have exclusive rights to:

- Reproduce the work in copies;
- Prepare derivative works based upon the work;
- Distribute copies...of the work to the public by sale or other transfer of ownership, or by rental, lease, or lending;
- Perform the work in public (e.g. literary, musical, dramatic, movies, etc.);
- Display the copyrighted work publicly;
- In the case of sound recordings, to perform the work publicly by means of a digital audio transmission.

Web pages, like other works, are protected under the copyright law. Scientific authors may transfer their copyrights to publishers or journals who then own the rights to use of these works. Informative resources are available to better understand use of copyrighted materials, notably the *AMA Manual of Style*.<sup>3</sup>

Students unsure whether or not use of a work falls under *fair use* guidelines or how to obtain or document use of copyrighted works may request assistance from the library faculty (914) 594 4210. At times, it may not be clear who the current copyright holder is, or how to obtain permission to use materials or websites. Consults may be scheduled, and staff will assist students in the use of software that may identify copied or plagiarized wording.

For more information, there are many good web resources to facilitate the legal use of scholarly or licensed materials. *Creative Commons*, for example, is one alternative to traditional copyright that is designed to allow the author to retain copyright while giving permission to others to use materials for nonprofit purposes.<sup>4</sup>

<sup>1</sup>U.S. Copyright Office. Copyright basics. <a href="http://www.copyright.gov/circs/circ1.html">http://www.copyright.gov/circs/circ1.html</a>

12/4/2008 Diana Cunningham

This document is available at: <a href="http://library.nymc.edu/informatics/studcopy.cfm">http://library.nymc.edu/informatics/studcopy.cfm</a>

<sup>&</sup>lt;sup>2</sup>Medical Library Association. Rev. ed. *The Copyright law and the health sciences librarian*. Chicago, IL: MLA, 2007. Available: <a href="http://www.mlanet.org/members/copyright/index.html">http://www.mlanet.org/members/copyright/index.html</a>

<sup>&</sup>lt;sup>3</sup>Iverson, C. *AMA manual of style: A guide for authors and editors.* 10th ed. New York, NY: Oxford University Press, 2007.

<sup>&</sup>lt;sup>4</sup>Creative Commons. <a href="http://creative commons.org/">http://creative commons.org/</a>

# SCHOOL OF HEALTH SCIENCES AND PRACTICE NEW YORK MEDICAL COLLEGE

#### **THESIS TOPIC SELECTION**

Name:	Student ID Number:
Topic Description:	
<del></del>	
Submitted by	
Student Signature	Date
Approved by	
Department Chair/ProgramAdvi Signature	isor Date

#### **Attachment C**

# SCHOOL OF HEALTH SCIENCES AND PRACTICE NEW YORK MEDICAL COLLEGE THESIS PROPOSAL AND PLAN

Name	Student ID Number	
<u> Fitle:</u>		
		====
Submitted by		
Student Signature	Date	
Approved by		
Thesis Advisor Signatur	re Date	

#### **Attachment D**

#### **FORMAT FOR TITLE PAGE**

# SCHOOL OF HEALTH SCIENCES AND PRACTICE NEW YORK MEDICAL COLLEGE

(Title)

(Author's Legal Name)

A Thesis in the Program in

Submitted to the Faculty of the School of Health Sciences and Practice in Partial Fulfillment of the Requirements for the Degree of Master of Public Health [for the Degree of Master of Science] at New York Medical College

(Year)

#### **Attachment E**

# SCHOOL OF HEALTH SCIENCES AND PRACTICE NEW YORK MEDICAL COLLEGE

#### THESIS APPROVAL

Name of Student:		
(Last)	(First)	(Middle)
Student ID #	Program	
Master of Public Health thesis	Master of Science thesis	
Thesis Title:		
Thesis Advisor:		
	Date of	Acceptance
Reader:	Data of	Acceptance
	Date of A	Acceptance
Department Chair/		
Program Advisor:		Acceptance
V' D		
Vice-Dean:		Acceptance
Grade:		