Meharry Medical College
Accreditation History

First accredited: June 2022
Next review: July 2027
Maximum class size: 25

October 2026
The program's PANCE pass rate percentage was 85% or less for its 2025 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

April 2026
The commission **reviewed and more information requested** of the report addressing 5th edition

- ***Standard A3.14*** (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program.
- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- ***Standard B4.01a*** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)
- ***Standard B4.01b*** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)

Additional information (Published practices of the institution and program that are used to make admissions decisions, completed "Preceptor License Cert Template," description of the program's vetting process used to determine whether "other clinicians" are qualified to serve as preceptors, how the program aligns student assessment with what the program expects of a student on supervised clinical practice experiences, and how evaluations allow the program to identify and address any student deficiencies in the expected learning outcomes in a timely manner) due August 31, 2026.

No additional information required for 5th edition:

- ***Standard B1.03e*** (provided evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)

Report due July 1, 2026:

- Update PANCE pass rate data, Budget tab data, tuition and fees data and clinical phase start date in Program Management Portal
- Update goals and Graduation Rate Table on program website.

The number of students in the Program Management Portal exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2025
The commission **acknowledged** the report providing evidence of

- Updated Details tab in Program Management Portal

No further information requested.

June 2025 (following Provisional Monitoring review)

Accreditation-Provisional; Program demonstrates continued progress in complying with the *Standards* as it prepares for the graduation of the first class of students. The commission noted 6 areas of noncompliance with the *Standards*.

Next Comprehensive Evaluation: July 2027 (Final Provisional). Maximum class size: 25.

Report due August 22, 2025:

- Update Details tab in Program Management Portal.

Report due October 24, 2025 (*Standards*, 5th edition):

- ***Standard A3.14*** (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program.
- ***Standard B1.03e*** (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)
- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- ***Standard B4.01a*** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)
- ***Standard B4.01b*** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)

No report due (the program will submit a Self-Study report with its final provisional application):

- ***Standard C1.03*** (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

March 2023

The commission **accepted** the report addressing 5th edition

- ***Standard B4.01b*** (provided evidence of student assessment in the supervised clinical practice experience components that will b) allow the program to identify and address any student deficiencies in a timely manner).

No further information requested.

June 2022

Accreditation-Provisional; Program has not yet enrolled students but plans and resource allocation, if fully implemented as planned, demonstrate the probability to meet the ARC-PA *Standards.* Next

Meharry Medical College
Accreditation History

First accredited: June 2022
Next review: July 2027
Maximum class size: 25

Comprehensive Evaluation: June 2025 (Provisional Monitoring). The program is approved for up to 25 students.
Report due August 8, 2022 (*Standards*, 5th edition) -

- ***Standard B4.01b*** (lacked evidence of student assessment in the supervised clinical practice experience components that will b) allow the program to identify and address any student deficiencies in a timely manner).

No report due for the following citation(s) (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- ***Standard A3.11*** (lacked evidence the website accurately reflects the program offered; corrected during the site visit) and
- ***Standard A3.13a*** (lacked evidence of defined, published, consistently applied and made readily available to prospective students, policies and procedures to include a) admission and enrollment practices that favor specified individuals or groups; corrected subsequent to visit).