Exam Number __ __ __

Instructor : Professor Thaddeus Pope

Course Title : Bioethics & Law

Section : Law 9558, Section 1

Format : Take Home
Total Time for Exam : 72 hours
Total Number of Pages : 13 Pages

Reference Materials Allowed

Open Book (all reference materials allowed)

Take-Home Exam Instructions

1. Please know your **correct Spring 2013 exam number** and include this number at the top of each page of your exam answer (for example, in a header). To locate your exam number, go to www.hamline.edu and follow the steps below. A graphic guide to locating your exam number is attached to these instructions.

Click on Logins in the header.

Go to Piperline

Log in to the secure area

Enter your Student ID and PIN

Click Student Services

Click Registration

Click Student Detail Schedule

Select the appropriate term from the drop down menu

Exam Numbers are listed below Total Credit Hours at the top of the page

- 2. Confirm that you are using and have typed the **correct exam number** on your exam document.
- 3. You may download the exam from the course TWEN site any time after 12:01 a.m. on Monday, April 29, 2013. All exams must be submitted within 72 hours of download. But, in any case, all exams must be submitted by the end of the final exam period, i.e. by 11:59 p.m. on Monday, May 13, 2013. Therefore, you will want to download your exam no later than 11:59 p.m. on Friday, May 10, 2013, to ensure that you have the full allowed 72 hours to complete your exam.
- 4. Write your answers to BOTH parts of the exam in a word processor. Save your document as a **single PDF file** before uploading to TWEN. Use your exam number as the name for the PDF file.

Instructions Specific to This Examination

GENERAL INSTRUCTIONS:

- 1. **Honor Code**: While you are taking this exam, you are subject to the Hamline University Code of Conduct. You may not discuss it with anyone until after the end of the entire exam period. It is a violation of the Honor Code to share the exam questions. Shred or delete the exam questions immediately upon completion of the exam. They will be reposted after the end of the exam period.
- 2. **Competence**: Accepting this examination is a certification that you are capable of completing the examination. Once you have accepted the examination, you will be held responsible for completing the examination.

- 3. **Exam Packet**: This exam consists of **13 pages**, including these instructions but excluding the appendix of graphics on getting an exam number and submitting on TWEN. Please make sure that your exam is complete.
- 4. **Identification**: Write your exam number on the top of each page of your exam answer.
- 5. **Anonymity**: The exams are graded anonymously. Do not put your name or anything else that may identify you (except for your exam number) on the exam. **Failure to include your correct exam number will result in a 10-point deduction.**
- 6. **Total Time**: Your completed exam is due within 72 hours of downloading it. If your exam is uploaded more than 72 hours after downloading the exam, your exam grade will be **lowered by one point** for every minute in excess of the 72 hours. If the timestamp on your uploaded exam indicates that you have exceeded the 72-hour limit by more than 15 minutes, the situation may be referred for a Code of Conduct investigation and potential discipline. Please save sufficient time to successfully upload your exam.
- 7. **Timing:** The exam has been written as a three-hour exam. A student could write basically complete answers to all the questions in three hours. But since this is a take-home exam, you will want to take some extra time (perhaps two hours) to outline your answers and consult your course materials. You will also want to take some extra time (perhaps two hours) to revise and polish your answers, such that you will not be submitting a "first draft." In short, while this is a 72-hour take home, you really need not spend more than six hours on this exam.
- 8. **Scoring**: There are 150 total points on the exam. The final exam comprises 50% of your overall course grade, 150 of the 300 total course points.
- 9. **Open Book**: This is an OPEN book exam. You may use any written materials, including, but not limited to: any required and recommended materials, any handouts from class, PowerPoint slides, class notes, and your own personal or group outlines.
- 10. **Additional Research**: While you may use any materials that you have collected for this class, you are neither expected **nor are you permitted** to do any online or library research (e.g. on Lexis, Westlaw, Google, Bing, reference materials) to answer the exam questions.
- 11. **Format**: The exam consists of two parts:
 - PART ONE comprises 25 multiple choice questions worth 2 points each, for a combined total of 50 points. PART TWO comprises four short essay questions worth a combined total of 100 points.
- 12. **Grading**: All exams will receive a raw score from zero to 150. The raw score is meaningful only relative to the raw score of other students in the class. Your semester course letter grade is computed by summing the midterm, final, and quiz scores. I will post an explanatory memo and a model answer to TWEN a few weeks after the exam.

SPECIAL INSTRUCTIONS FOR PART ONE:

- 1. **Numbered List of Letters:** In your exam document create a vertical numbered list (1 to 25). Next to each number type the letter corresponding to the best answer choice for that problem.
- 2. **Ambiguity**: If (and only if) you believe the question is ambiguous, such that there is not one obviously best answer, neatly explain why immediately after your answer choice. Your objection must (i) identify the ambiguity or problem in the question and (ii) reveal what your answer would be for all possible resolutions of the ambiguity. I do **not** expect this to be necessary.

SPECIAL INSTRUCTIONS FOR PART TWO:

1. **Submission**: In your exam document create clearly marked separate sections for each of the four problems:

Short Answer 1 Short Answer 3
Short Answer 2 Short Answer 4

- 2. **Outlining Your Answer**: I strongly encourage you to use at least one-fourth of the allotted time per question to outline your answers on scrap paper before beginning to write. Do this because you will be graded not only on the substance of your answer but also on its clarity and conciseness. In other words, organization, precision, and brevity count. If you run out of insightful things to say about the issues raised by the exam question, stop writing until you think of something. Tedious repetition, regurgitations of law unrelated to the facts, or rambling about irrelevant issues will negatively affect your grade.
- 3. **Answer Format**: This is important. Use headings and subheadings. Use short single-idea paragraphs (leaving a blank line between paragraphs). Do not completely fill the page with text. Leave white space both between sections and paragraphs.
- 4. **Answer Content**: Address all relevant issues that arise from and are implicated by the fact pattern and that are responsive to the "call" of the question. Do not just summarize all the facts or all the legal principles relevant to an issue. Instead, apply the law you see relevant to the facts you see relevant. Take the issues that you identify and organize them into a coherent structure. Then, within that structure, examine issues and argue for a conclusion.
- 5. **Citing Cases**: You are welcome but not required to cite cases. While it is sometimes helpful to the reader and a way to economize on words, do not cite case names as a complete substitute for legal analysis. For example, do not write: "Plaintiff should be able to recover under A v. B." Why? What is the rule in that case? What are the facts in the instant case that satisfy that rule?
- 6. **Cross-Referencing**: You may reference your own previous analysis (e.g. B's claim against C is identical to A's claim against C, because ___." But be very clear and precise what you are referencing. As in contract interpretation, ambiguity is construed against the drafter.
- 7. **Balanced Argument**: Facts rarely perfectly fit rules of law. So, recognize the key weaknesses in your position and make the argument on the other side.
- 8. **Additional Facts**: If you think that an exam question fairly raises an issue but cannot be answered without additional facts, state clearly those facts (reasonably implied by, suggested by, or at least consistent with, the fact pattern) that you believe to be necessary to answer the question. Do not invent facts out of whole cloth.

Exam Misconduct

The Code of Conduct prohibits dishonest acts in an examination setting. Unless specifically permitted by the exam or proctor, prohibited conduct includes:

- Discussing the exam with another student
- Giving, receiving, or soliciting aid
- Referencing unauthorized materials
- Reading the questions before the examination starts
- Exceeding the examination time limit
- Ignoring proctor instructions

Multiple Choice Questions

- 25 Questions worth 2 points each = 50 total points.
- Mark the letter of the best answer in a vertical list in your exam document.
- 1. After years of planning and consultation, the Organ Procurement and Transplantation Network (OPTN), the government-chartered body responsible for allocating cadaveric organs in the United States, has proposed a new regime to address "misalignments" and make better use of the scarce supply of kidneys. Rather than simply giving kidneys to the patients who have been waiting the longest, the new system will instead allocate the highest-quality kidneys to the people for whom a transplant promises the most years of additional life. The OPTN is doing this because:
 - A. Many people who receive kidneys from deceased donors gain only a few years of life, because those recipients were relatively old and in poor health to begin with
 - B. Younger recipients who receive kidneys from older decedents often outlive their new organs, eventually returning to the waiting list for a second transplant
 - C. Both A and B
 - D. Neither A nor B
- 2. The "Oregon Plan" is an attempt to provide greater access to healthcare services (number of people served) by prioritizing services. So, instead of rationing medical care by excluding certain members of the population from having any access, Oregon attempted to ration care according to a priority list of services. To which health insurance programs does the priority list apply?
 - A. Medicare
 - B. Medicaid
 - C. Private insurance
 - D. Both A and B
 - E. All of the above
- 3. 500 patients need Treatment A at a cost of \$1000 per patient. Treatment A extends the life of each patient (already in perfect health) by five years. What is the cost effectiveness of Treatment A?
 - A. \$100 / QALY
 - B. \$200 / QALY
 - C. \$250 / QALY
 - D. \$1000 / QALY

- 4. Who determines whether and when you will be added to National Transplant Waiting List of all people waiting for a transplant?
 - A. OPTN/UNOS
 - B. Your transplant program, if they determine that you are a suitable transplant candidate
 - C. Nobody, because listing is basically automatic. Suitability factors only into your position on the list, not whether/when you are on the list
 - D. None of the above
- 5. Kidneys are allocated primarily on the basis of:
 - A. Severity of illness and other medical factors, such as blood type
 - B. Length of time a person has been on the wait list
- 6. Livers are allocated primarily on the basis of:
 - A. Severity of illness and other medical factors, such as blood type
 - B. Length of time a person has been on the wait list
- 7. Waiting time for an organ can vary dramatically from one of the 58 OPO regions to another. To increase her chances, can a patient simultaneously be "listed" at transplant centers in two different OPO regions?
 - A. Yes
 - B. No
- 8. How does the OPO learn of the potential availability of an organ?
 - A. The hospital must notify the OPO of a patient's imminent death
 - B. The hospital must notify the OPO once it determines either that the imminently dying patient is a registered donor or that the patient's family is willing to consent
 - C. The family of the donor must notify the OPO
 - D. The OPO will receive notification from the OPTN/UNOS list system
- 9. Must a kidney from a living related donor be listed and matched on the OPTN/UNOS waiting list?
 - A. Yes
 - B. No

- 10. Which of the following conditions are legitimate reasons to conclude that you are NOT a candidate for a transplant?
 - A. Severe neurologic limitations likely to affect your ability to care for your transplant
 - B. Personality, social or psychological disorders that affect your ability to follow your treatment plan
 - C. Being over 70 years old
 - D. Having inadequate financial resources that may interfere with your ability to afford medication and follow-up care
 - E. Lack of family or social support that could affect your ability to care for your transplant
 - F. All of the above
- 11. Who determines whether a donor organ is acceptable, such that it will be matched and transported to the recipient's transplant center?
 - A. OPTN/UNOS
 - B. The recipient's transplant center
 - C. The recipient's OPO
- 12. All cadaveric organs are allocated according to a ranking that prioritizes patients who have the most medically urgent need for the organ.
 - A. True
 - B. False
- 13. All cadaveric organs are allocated according to a ranking that is designed to maximize the number of QALYs produced.
 - A. True
 - B. False
- 14. Chandler in Duluth makes the following agreement with Phoebe in Saint Paul. If Phoebe donates a kidney to Chandler's wife, Monica; then Chandler will donate a kidney to Phoebe's husband, Ross. (Chandler and Monica are not compatible; Phoebe and Ross are not compatible.) Does this violate NOTA?
 - A. Yes
 - B. No

- 14. Chandler in Duluth makes the following agreement with Phoebe in Saint Paul. Chandler will donate an organ to Phoebe for \$12,000. Does this violate NOTA?
 - A. Yes
 - B. No
- 15. Whether or not Chandler or Phoebe violates NOTA in Question 14, would the Mayo Clinic violate NOTA by performing the transplant pursuant to the agreement in Question 14? Assume that Phoebe pays for the transplant with cash.
 - A. Yes
 - B. No
- 16. Which of the following is an example of how the Principle of Respect for Persons (autonomy) can be applied to a study employing human subjects?
 - A. Determining that the study has maximized benefits and minimized risks
 - B. Ensuring that the selection of subjects includes people from all segments of the population
 - C. Providing detailed information about the study and obtaining the subject's consent to participate
 - D. Using innovative or experimental procedures
- 17. How long is an investigator required to keep consent documents, IRB correspondence, and research records?
 - A. Until data analysis is complete
 - B. Until the study is closed
 - C. As long as the investigator is at that institution
 - D. For a minimum of three years after completion of the study
- 18. According to federal regulations, which of the following best describes when expedited review of a new, proposed study may be used by the IRB?
 - A. The study includes only research subjects that are healthy volunteers
 - B. The study involves no more than minimal risk and meets one of the allowable categories of expedited review specified in federal regulations
 - C. The study is required for a student research project
 - D. The study does not require informed consent or survey instruments

- 19. Amendments involving changes to IRB approved protocols do NOT need prior IRB approval if:
 - A. The investigator keeps careful records of all changes and includes them in the final report
 - B. They only involve changes to the consent form
 - C. The changes must be immediately implemented for the health and wellbeing of the subject
 - D. They are eligible for review using expedited procedures
- 20. IRB continuing review of an approved protocol must:
 - A. Include copies of all signed consent forms
 - B. Be conducted by a convened IRB
 - C. Occur only when the level of risk changes
 - D. Occur at least annually
- 21. As part of a research study, a physician plans to review medical records of the next 50 of her patients who require magnetic resonance imaging (MRI) scans for clinical treatment. The physician will review the medical records, and write down the clinical indication for the scans, any existing injuries, current prescriptions, as well as other clinical data. The clinical indication for the scans and the other clinical data will be collected in the medical records for treatment purposes as part of standard clinical care. The physician will use a coding system to be able to identify the patient's information; however, the "key" to the coding system will be stored separately from the data in a locked cabinet that only she will have access to. Which of the following is true?
 - A. The study is human subject research which is eligible for expedited review
 - B. The study is human subject research which must be reviewed by the full IRB
 - C. The research does not meet the federal definition of human subject research
 - D. The study is human subject research which is eligible for exemption
- 22. A faculty member wants to measure the effectiveness of a new psychological assessment instrument before including it in his new textbook. She plans to conduct a pilot test by administering both the new instrument and an established instrument and then compare the results. Which of the following populations might be most vulnerable to undue influence to participate in her research?
 - A. Senior faculty in her department
 - B. Students taking one of her courses
 - C. Members of her professional society
 - D. Members of her community organization

- 23. An investigator is recruiting subjects for a study of a new antidepressant drug. The investigator has targeted a population of patients who might clearly benefit, but who are also institutionalized for a variety of psychiatric conditions. The patients are in a controlled environment and it is believed there would be little problem recruiting subjects for the study. Which of the following issues of vulnerability should be of most concern to the IRB?
 - A. The patients may have experience participating in research
 - B. The patients are institutionalized
 - C. The patients have clinical depression, which is a difficult disease to treat
 - D. The patients are probably illiterate
- 24. An investigator planning to study behavioral changes during alcohol intoxication will pay subjects \$750 for 6 hours of testing that includes drinking a moderate level of alcohol and completing several written questionnaires. She plans to recruit college students taking his courses, as well as economically disadvantaged and homeless people.

Which of the following is the most important for the investigator to address before submitting the protocol to the IRB?

- A. Literacy of homeless subjects
- B. Forms of advertising for subject recruitment
- C. Potential undue influence or coercion of subjects
- D. Method of payment to subjects
- 25. A group of elderly men, whose government disability benefits are the sole source of income, is approached regarding an experimental research study. The study involves using different therapeutic interventions in men with colon cancer. The study involves more than minimal risk, but offers substantial financial incentives that are equal to two months of disability benefits. The IRB will be most concerned about the possibility of:
 - A. Undue influence on the subjects
 - B. Conflict of interest
 - C. Inaccuracy of data
 - D. Inadequacy of research design

Essay Questions

- There are four short essay questions, worth a combined total of 100 points.
- The Essays are worth 15, 15, 30, and 40 points respectively.

Short Essay Question 1

- 15 points
- Limit your answer to 1000 words.

Compare the regulatory composition requirements for the OPTN/UNOS Board of Directors with the regulatory composition requirements of an IRB. Specifically, identify and explain two ways in which the composition requirements of either one are better designed than the other to produce fairer, more circumspect, less conflicted, or less biased results.

Short Essay Question 2

- 15 points
- Limit your answer to 1000 words.

In November 2005, the Centers for Medicare & Medicaid Services (CMS) announced that Medicare would not cover bariatric surgery for beneficiaries over age 65, because evidence of the risks was inconclusive. CMS noted the "paucity of randomized control trials (RCTs), non-randomized control trials (NRCTs), and good quality data for the population over age 65." But CMS said that coverage would be extended, if the beneficiary was in a clinical trial. This was part of CMS' "coverage with evidence development" program. Payment for bariatric surgery would be made only for those beneficiaries who "volunteer" for clinical trials.

Assume that OHRP regulations apply to the "clinical trial" research on geriatric bariatric surgery. Analyze this program under the regulations and any other relevant human subject research materials from class.

Short Essay Question 3

- 30 points
- Limit your answer to 1500 words.

Assume the accuracy of the following medical facts. Approximately 10 million radiographic procedures using iodinated contrast agents are performed in the United States every year. Until recently, agents having a relatively high osmolality, called "high osmolar contrast agents" (HOCAs), have been used for these procedures. They have excellent diagnostic properties but can cause discomfort and adverse reactions due either to the high osmolality or to allergic reactions. The side effects and reactions range from (1) a sensation of heat and mild flushing, to (2) nausea and vomiting, to (3) severe circulatory or respiratory collapse.

Although HOCAs have been considered safe and effective by the medical community and by the Food and Drug Administration for decades, the possibility of reactions led investigators to search for alternative agents that have lower risks. Eventually, researchers identified a new set of agents that have lower risks, "low osmolar contrast agents" (LOCAs). LOCAs cause fewer reactions related to osmolality. They also cause fewer allergic reactions.

The following table summarizes these advantages. Across any patient population receiving HOCA contrast agents, 3.2% ill suffer mild reactions, 0.3% will suffer moderate reactions, and 0.1% will suffer severe reactions. If LOCAs instead of HOCAs were used, all these rates of reactions would be lower as indicated in column 4.

Reaction	QALY Gain from avoiding reaction	HOCA % reaction rate	LOCA % reaction rate	Difference: If patient given HOCA instead of
	(total per patient)			LOCA, risk raised by %
Mild	0.05	3.2%	0.80%	+ 2.40%
Moderate	0.1	0.3%	0.09%	+ 0.21%
Severe	0.6	0.1%	0.004%	+ 0.096%

Unfortunately, LOCAs cost 15 times as much as do HOCAs. Specifically, LOCAs cost approximately \$100 more than HOCAs per patient. Of course, since LOCAs produce fewer adverse reactions, there is a savings from not having to deal with those reactions (e.g. cleaning up vomit). The savings works out to be about \$10 per patient. Thus, the net increase in cost of LOCAs over HOCAs is \$90.

You are a health economist for a health system. Every year, the system performs procedures using contrast agents for 40,000 members. The CEO has asked you whether the system should adopt a guideline recommending use of LOCAs instead of HOCAs. She wants to know whether the lower risks of LOCAs are worth their extra costs.

In making your recommendation, please separately identify: (1) the total cost to the system of switching to LOCAs, (2) the total QALYs gained by switching, and (3) the cost per QALY. Does your recommendation depend on what else you could spend the savings (by using HOCAs)?

Short Essay Question 4

- 40 points
- Limit your answer to 2000 words.

You are the business manager of Kyzerr HMO - Saint Paul Region. It is nearing the end of the financial year, when you discover that \$60,000 of the Pharmacy budget for the year has not been spent. The surplus cannot be saved until next year. If not spent, the surplus must be returned to the national corporate office. To find the best way of spending this money you sent a memo to your practice pharmacists and physicians, requesting details of groups of patients who might be treated using the surplus funds. You received the following six suggestions:

Suggestion 1: Five children between the ages of 4 and 12 years are waiting to receive the newer antiepileptic drugs. The children come from mixed family backgrounds but all are finding that their quality of life is affected by their epilepsy. In particular, their educational achievement is suffering. The cost of providing the newer drugs to all five children for a year is \$14,350 and the total expected gain (for all 5) in quality adjusted life years is estimated to be 0.05 per year.

Suggestion 2: The patient concerned is a working mother aged 42 years with two children aged 11 and 5 years. Her husband died 6 years ago from prostate cancer. She has bravely fought her brain tumor but it has recurred after standard therapy and the doctors are now saying the only hope is treatment with phemozolomide. However, phemozolomide is not currently provided by Kyzerr outside of clinical trials. There are currently no clinical trials of phemozolomide in the area that she could participate in. The cost for five cycles of treatment is \$60,000 and the benefits are unknown.

Suggestion 3: Kyzerr currently has two drug addicts seeking a supervised methadone program. One is aged 19 years and has been addicted since he was 15 years old. The other is 24 years old and has been an addict for only two years after experiencing personal problems. Both are unemployed due to an inability to hold down a job. The financial cost of treating the two patients is \$15,000 and it is believed the benefits (total for both) would be 0.134 QALYs, if they successfully kick their habit.

Suggestion 4: Three patients have unstable angina and are facing a high risk of death or myocardial infarction (heart attack). All three are highly successful business people, aged between 50 and 60 years, with stressful jobs managing a large number of employees. Without treatment with certain class three inhibitors they are likely to die within a month. All three could afford the treatment themselves but argue they shouldn't have to pay because they have contributed significant amounts of premium dollars over their working lives. All three smoke and the probability of them giving up is low. Two of the three plan to retire and go on extended foreign holidays. The financial cost of treatment for all three is at a slightly reduced cost of \$15,000, due to the pharmacist being able to negotiate a discount with suppliers. The anticipated benefits are estimated to be 18 QALYs for treating all three.

Suggestion 5: One male patient aged 88 years is suffering from ALS (Lou Gehrig's disease) a progressive degenerating disease leading to impaired speech, swallowing, and breathing. There is no cure for the condition but quality of life can be improved for the short period of life remaining by taking Riluzzole. The patient desperately wants to be able to attend his granddaughter's wedding in three weeks, in a reasonable health state which he believes this drug will help him achieve. The financial cost is \$30,000 and the expected benefits are 0.09 QALYs.

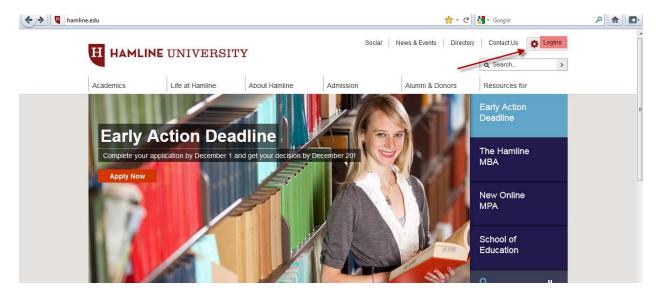
Suggestion 6: One 25 year old with metastatic breast cancer would benefit from treatment with raxanes. Although she doesn't have any children she does have a husband and is an active volunteer across a number of local charities. The cost of treatment would be \$30,000 (enough for the first two cycles to see if the patient starts to respond) and the anticipated benefits either 0 or 15 QALYs depending on whether the treatment is successful or not (about 1 in five women gain benefit from treatment).

- 1. Argue which Suggestions should be covered subject to the budget constraint. For example, you could fund Suggestion 2 and no others. Or you could fund both 5 and 6. Note that suggestions cannot be partially implemented. If a suggestion states that 3 people need treatment, then all three must receive the treatment or no one does.
- 2. Also, if you identified an additional budget surplus (say another \$40,000), which Suggestions would you fund next?

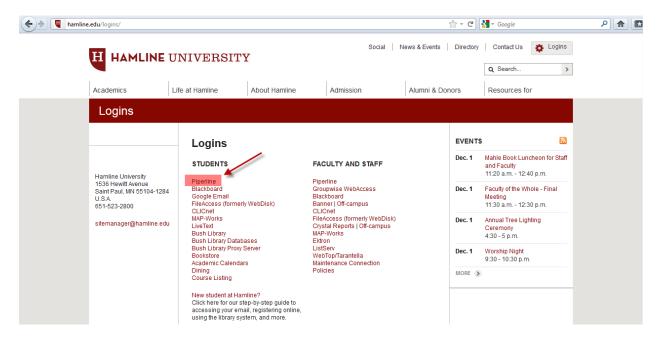
END OF EXAM

How to Find Your Final Exam Number via Piperline

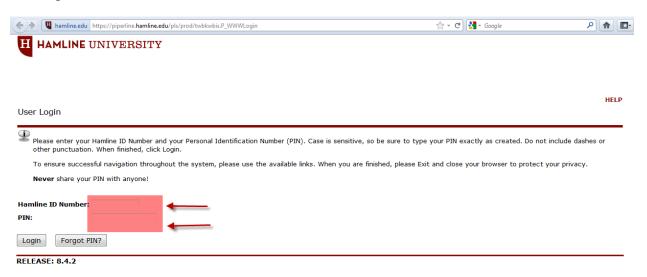
- 1. Go to www.hamline.edu
- 2. Click on the "Logins" button on the top of the right hand corner of the page.



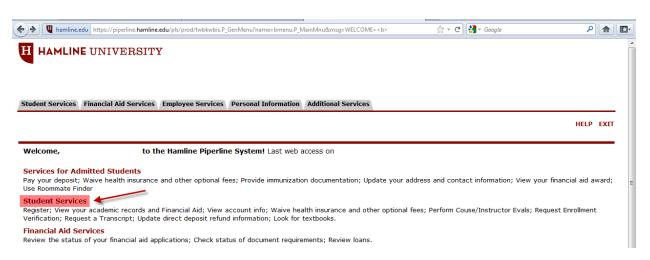
3. Click on "Piperline."



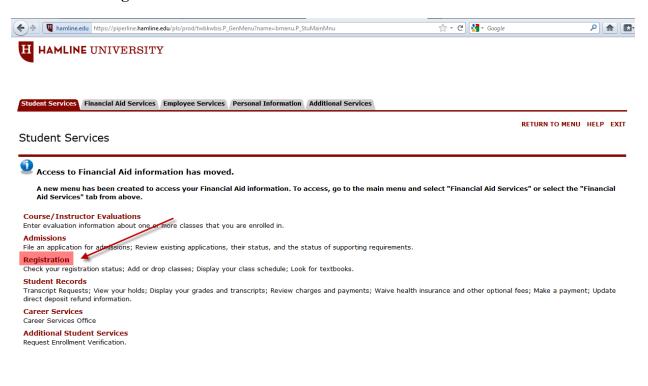
4. Enter your **Hamline ID Number** (this is the seven digit number starting with a nine) and your **PIN.** Click "**Login**." Remember that this is case sensitive. (If this is your first time logging into Piperline, you will be taken to a page where you will create a new password.)



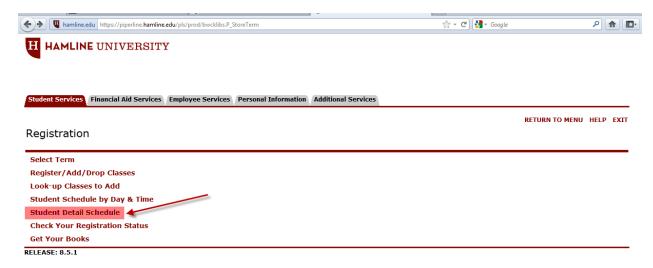
5. Click "Student Services."



6. Click "Registration."

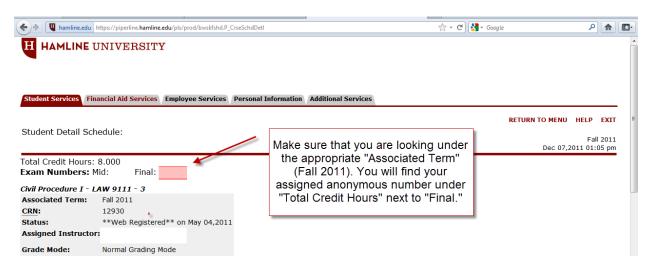


7. Click "Student Detail Schedule."



8. You will then need to select the appropriate term from a drop-down menu (Fall 2011).

9. Your **Final Exam Number** will be located under the **Total Credit Hours** at the top of the page.

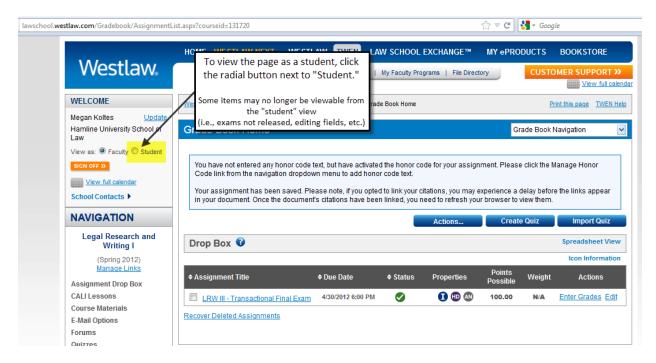


Everyone needs their final exam number to take the exam.

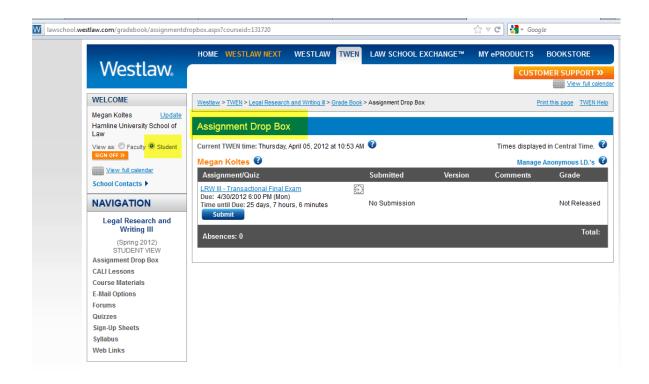
You will use the same exam number for all of your exams.

TWEN - View as a Student

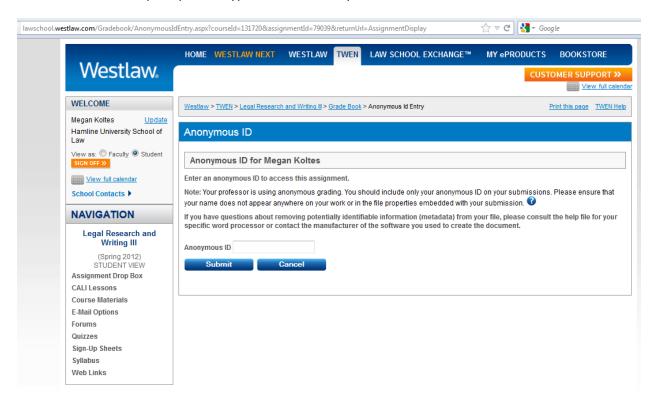
- 1. Log on to Westlaw as normal (<u>www.lawschool.westlaw.com</u>).
- 2. Select the TWEN tab.
- 3. Under your log-in information in the upper left corner, select the option to view as a student.



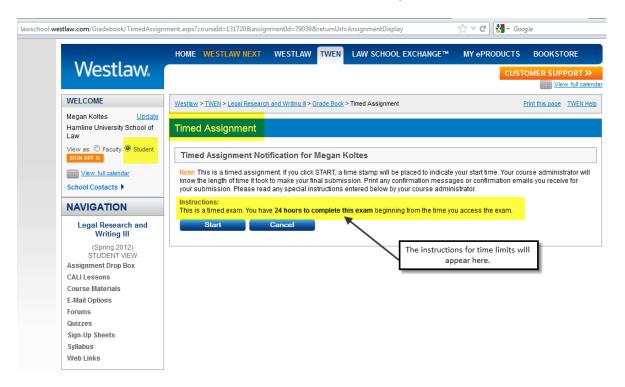
4. Once an exam has hit the time and date on which it should become available, students will then be able to see it in the "Assignment Drop Box."



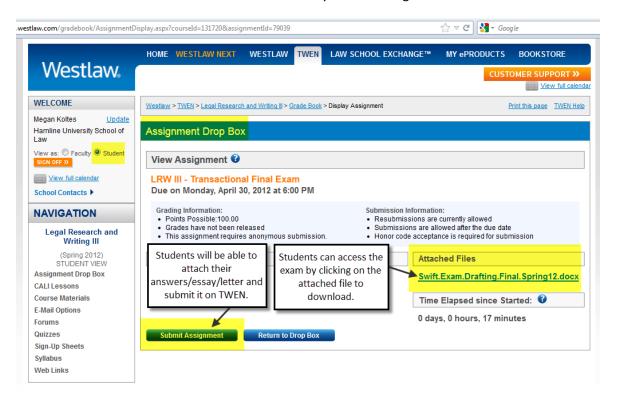
5. The student will be prompted to type in his/her anonymous I.D. to access the exam.



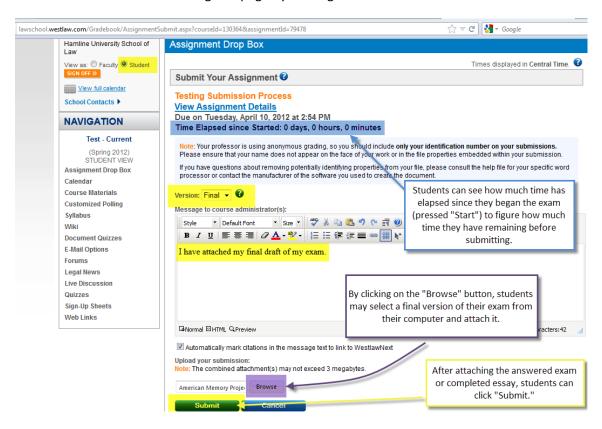
6. If the exam is a timed exam, the student will be given instructions stating as such. (The exam does not boot students out after the maximum amount of time; rather, the TWEN time stamps when a student accesses an exam and when a student submits an exam.)



7. The student will be able to access the exam by downloading the attached file.



8. The student will be able to attach their submission by clicking "Submit Assignment" and attaching their submission on the following webpage by clicking "Browse."



9. After submitting the attached exam/essay, students can view the time stamps on their assignment on the proceeding webpage. This will show when the student first hit the "Start" button and when the student hit the "Submit" button. (This is crucial for timed tests.)

