I. **SCOPE / PURPOSE**

As a means of achieving its Purpose, Vision and Values and as space and staffing permits, NH allows post-secondary students to participate in observation or work experiences in order to complete course objectives.

The purpose of this policy is to ensure that documentation in the medical record by health care professional and allied health care professional students complies with all rules and regulations related to the billing of professional services, while meeting our educational obligations and accreditation requirements.

II. **POLICY**

**Student Participation:**

Prior to entry of students into NH facilities, a current agreement must be in place with the student’s educational institution. NH department heads, in conjunction with educational institution faculty are accountable for assuring adherence to agreements.

1. When graduate students will be completing educational experiences, and in order to protect the safety and welfare of patients, students, faculty, and team members, the procedure prescribed below shall be carried out.
2. Students shall not perform credentialed procedures unless approved through the same educational and credentialing process as team members in that setting.
3. No procedure shall be performed for the first time without the direct supervision of the preceptor/designee.

Electronic Health Record/Dimensions Inpatient and/or ambulatory computer training will be required (as appropriate) for all students participating in clinical experience(s) at Novant Health. This training will be scheduled through Student Programs or a CBL process.

**Student Documentation:**

Novant Health allows medical students, nurse practitioners (NP), and physician assistant (PA) students, and other clinic based allied health professional students to document in the medical record. However:

1. The Health Care Financing Administration’s (HCFA) guidelines allow medical students and other learners to document only the past, family and social history (PFSH) and the review of systems (ROS). All other key elements of the visit must
be personally documented by the teaching physician/preceptor.

2. “Students may document services in the medical record. However, the teaching physician/preceptor must verify in the medical record all student documentation or findings, including history, physical exam and/or medical decision making. The teaching physician/preceptor must personally perform (or re-perform) the physical exam and medical decision making activities of the E/M service being billed, but may verify any student documentation of them in the medical record, rather than re-documenting this work.

3. **Review of history-taking**: Student should use the interviewing skills that are consistent and systematic by:
   a) As appropriate for educational program; Obtaining Chief complaint/agenda setting, components of History of Present Illness, review of systems, components of past medical/surgical/OBGYN (if female), family, social, allergy and medication history

4. **Review of the physical exam**: Student should perform the physical examinations as opportunities allow and with the permission of the patient and the preceptor:
   a) Observe, and perform, exam for each system if possible: HEENT, Pulm, CVS, GI, GU (male and female, with supervision), MSK, Neuro, Endo, and Derm.

### III. QUALIFIED PERSONNEL

Medical Students, Nurse Practitioner Students, and Physician Assistant Students

### IV. EQUIPMENT

N/A

### V. PROCEDURE

*The procedure serves as a guideline to assist personnel in accomplishing the goals of the policy. While following these procedural guidelines personnel are expected to exercise judgment within their scope of practice and/or job responsibilities.*

**NH Director of Student Programs or Coordinating Department Responsibilities:**

**A.** NH Director of Student Programs or Coordinating Department shall:

1. Manage educational institution requests for post-secondary student placement.
2. Assure that a current, signed agreement is in place between the requesting educational institution and the specific NH facility prior to student placement.
3. Manage information as needed related to post-secondary student work assignment and communicate work assignment conflicts to appropriate educational institution faculty.
4. Forward required orientation documentation/information for students to appropriate educational institution faculty.
5. Coordinate orientation for faculty to NH facilities
6. Establish a process to assure that information is forwarded to appropriate educational institution faculty regarding major changes in facility policy and procedure as well as in-service opportunities.
7. Monitor evaluative feedback from students, educational institution and NH staff
to identify trends and make improvements as needed.

NH Department Head Responsibilities:
A. The NH Department Head shall:
   1. Coordinate department specific orientation experiences with faculty as needed.
   2. Establish a process to assure that information is communicated with faculty and/or students regarding major changes in department policy and procedure as well as department in-service opportunities.
   3. Make decision regarding department’s ability to meet student’s (s’) educational objectives.

NH Employee Responsibilities
A. The NH employee shall:
   1. Retain accountability and responsibility for department work outputs in collaboration with student and/or faculty.
   2. Supervise students when they provide patient care, treatment, and services as part of their training.
   3. Assist students as appropriate to integrate the academic curriculum into professional practice.
   4. Refer problems, questions or concerns related to students, faculty, or work experience to the NH Department Head.

Student’s Responsibilities:
A. The Student Shall:
   1. Completes orientation Process/packet, found on the student website, prior to arrival in clinical areas
   2. Maintain American Heart Association CPR certification or by the American Red Cross, which certifies by AHA standards.
   3. Prepare for their clinical rotation prior to their arrival in the areas appropriate for the level of participation expected.
   4. Communicate the clinical learning objectives to the preceptor and collaborate with them to delineate patient care activities, documentation and reporting.
   5. Students shall wear uniforms including school ID badge. Novant Health ID Badges may be issued as required by practice setting and must be returned to preceptor at the end of rotation.
   6. Electronic Health Record/Dimensions Inpatient computer training will be required for all students participating in a clinical experience where applicable.
   7. Instructors and students may attend continuing education classes when space allows. There may be a charge associated with some classes.
   8. Prelicensure students may not perform any activities that is outside or restricted by the Scope of Practice for the NP/PA/MD.
   9. No assessment or procedure shall be performed for the first time by a student without the direct supervision of the preceptor/designee.
   10. Activities that prelicensure student may perform during clinical rotation should be based on clinical course objectives and school policies
       a. Following appropriate orientation, HIPAA training and completion of security/confidentiality consents, students may document in the medical record, under the supervision of the Teaching/Supervising physician/preceptor or Instructor.
b. All medical record documentation must be appropriately signed, titled, dated and approved by the student.

c. The documentation must be clearly labeled “[Medical, NP, PA, etc.] Student Documentation.”

d. Teaching/Supervising Physicians/Preceptors or Instructors may countersign the student’s documentation, “Reviewed and approved for educational purposes, only,” as required by facility, department and/or program requirements.

e. Since Medical Students are not Licensed Independent Professionals, a History & Physical performed by a Medical Student does not meet the Joint Commission requirement that a History & Physical must be performed, documented and authenticated by a practitioner with privileges to do so.

f. The Teaching/Supervising Physician/Instructor must verify and re-document the history of present illness (HPI), as well as perform and re-document the physical exam and medical decision making activities of the service, if performed and documented by a student.

Remote Access for APC Students:

A. Personal Devices: Novant Health does not allow personal devices (laptops, tablets, phones, etc.) to join the corporate wireless networks.
   1. Personal devices should be joined to “Guest”.
   2. Both Shortleaf and Tamarac – are part of our corporate network and do not appropriately protect the network from the risk associated with personal devices.

B. Haiku/Canto: Advanced practice students may be considered for access to Haiku to be able to complete assignments for their preceptors, on patients they were going to see / were responsible for (under physician/preceptor supervision), since students are required to read and review, the charts of the patients they are assigned to and rounding on the next day.
   1. Haiku/Canto is an app downloaded to a phone or tablet and all it requires to get activated is an email of the student’s corporate ID to haiku@novanthealth.org.

C. VPN or Citrix: It is not appropriate to extend other types of remote access to students (such as a VPN connection or Citrix).

VI. DOCUMENTATION

Electronic Health Record

VII. DEFINITIONS

**CMS:** Central Medicare Medicaid Services
**CVS:** Cardio Vascular System
**Endo:** Endocrine
**Derm:** Dermatology
**GI:** Gastroenterology
**GU:** Genourology
**HEENT:** Head, Ears Eyes, Nose and Throat
**HCFA:** Health Care Financing Administration  
**Haiku/Canto:** A Read-Only Epic application that Novant Health uses to let people access (but not alter) Epic records when not on site / a NH work station.  
**MSK:** MuscloSkeleton  
**Neuro:** Neurological /Nervous  
**Prelicensure Students:** A student in a medical program that upon graduation is eligible to take a Professional Licensing Examination to seek a licensure to practice.  
**Pulm:** Pulmonary  
**SOAP:** Subjective, Objective, Assessment, and Plan

VIII. RELATED DOCUMENTS

SmartPhrase to Capture Documentation Requirements When APC Students Are Involved in Patient Care  

IX. REFERENCES

- [https://www.aamc.org/download/316610/data/advisory3achallengefortheelectronichalthrecordsofacademicinstitute.pdf](https://www.aamc.org/download/316610/data/advisory3achallengefortheelectronichalthrecordsofacademicinstitute.pdf)
- The Core Entrustable Professional Activities for Entering Residency publication can be downloaded here: [www.aamc.org/cepaer](http://www.aamc.org/cepaer)
- CMS - Guidelines for Teaching Physicians, Interns, and residents, page 3, Evaluation and management Documentation Provided by Students (July 2007)
- The Joint Commission – Screening/Assessment; Medical Students Doing H&Ps (2013)

X. SUBMITTED BY

Student Programs, Physician Services Education and Training

XI. KEY WORDS

Medical Student documentation, Advanced Practice Student Documentation, Student Documentation, APC Student Documentation
XII. INITIAL EFFECTIVE DATE
DATES REVISIONS EFFECTIVE
DATES REVIEWED (No changes)
Date Due for Next Review

February 2018
06/2018

June 2021
## SIGNATURE SHEET

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<tr>
<td>EVP&amp; Chief HR Officer</td>
<td>Janet Smith-Hill</td>
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### COMMITTEES APPROVED BY:

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<tr>
<td>Novant Health APC Council</td>
<td>Emily Epling, PA</td>
<td>05/07/2018</td>
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