1) GENERAL POLICY STATEMENT

A medical school ensures that medical students in clinical learning situations involving patient care are appropriately supervised at all times in order to ensure patient and student safety, that the level of responsibility delegated to the student is appropriate to his or her level of training, and that the activities supervised are within the scope of practice of the supervising health professional.

a) Scope: This policy applies to required courses where students interact with patients and all required clerkships taught as part of the undergraduate medical education program. Course/clerkship directors are responsible for orienting students, supervising physicians, and health care providers who supervise medical students to the provisions of this policy; course/clerkship-specific expectations regarding appropriate levels of supervision and ensuring that supervising physicians and health care providers adhere to the provisions of this policy.

b) Responsible Department/Party/Parties:

   i. Policy Owner: Office of Academic Affairs
   ii. Procedure: Academic Affairs
   iii. Supervision: Dean’s Office

2) DEFINITIONS

For purposes of this Policy, the following terms and definitions apply:

To ensure oversight of medical student observation/supervision and graded authority and responsibility, the program must use the following classification of supervision:

Supervising Physician – an attending physician with TUSOM faculty appointment; a resident of fellow physician training in a graduate medical education program at, or affiliated with the School of Medicine

Healthcare Provider – Including but not limited to anesthesia assistants, dieticians, emergency medical technicians, medical sonographers, medical technologists, nurse practitioners, nurses, occupational therapists, paramedics, pharmacologists, physical therapists, physician assistants, psychologists, radiographers, respiratory therapists, social workers, surgical technicians, speech therapists and child life therapists.

- Direct Observation/Supervision – the observing/supervising physician is physically present with the student and patient.
• Indirect Supervision with direct observation/supervision immediately available - the supervising physician is physically within the hospital or other site of patient care, and is immediately available to provide direct observation.

For private practice settings in which healthcare providers are present, it is the responsibility of the supervising physician to ensure that healthcare providers are appropriately credentialed and privileged and capable of medical student supervision within the scope of their practice.

3) POLICY GUIDELINES

General Requirements:

• Medical students are not licensed and cannot provide unsupervised patient care. Clinical decision and orders are never created or enacted by medical students without a supervising physician’s input and approval. A supervising physician has the medical and legal responsibility for patient care at all times.
• A supervising physician is required to supervise medical students in clinical learning environments at a supervision level of “indirect supervision with direct supervision immediately available” or higher.
• The supervising physician will determine the appropriate level of supervision by taking into account the clinical site policies, complexity of the situation or procedure; risk for adverse events’ and the medical student’s level of training, demonstrated competence, maturity and responsibility.
• The course/clerkship director will determine the patient encounters and procedures that fellows, residents and/or appropriately credentialed healthcare providers may provide supervision.
• Individuals who have experience or witnessed a lapse in medical student supervision must report the incident to the course/clerkship director. Students may also anonymously report lapses in medical student supervision in the course evaluation.
• The course/clerkship directors will ensure that supervising physicians and healthcare providers are appropriately credentialed and privileged.

4) REVIEW/REVISION/IMPLEMENTATION

a) Review Cycle: This policy shall be reviewed by the Curriculum committee at least annually from the effective date.

b) Office of Record: After authorization, the Dean’s Office (Office of Academic Affairs) shall be the office of record for this policy.

5) RELATED POLICIES

Not applicable
6) GOVERNING LAW OR REGULATIONS

Not applicable

7) ATTACHMENTS

Not applicable