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Policy # 5-101

Supervision of Medical Students in Clinical Learning Situations Policy

Category: 5-Student Safety and Security

Curriculum Phase: All Phases

Author/Authoring Body: Curricular Affairs

Responsible Unit: All Units

Policy Contact: Curricular Affairs Dean Office

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Summary

The University of Arizona College of Medicine – Tucson (COM-T) recognizes and supports the importance of graded and progressive responsibility in medical student education as well as development and maintenance of excellent clinical learning programs. This policy outlines the requirements for supervising medical students. The college's goal is to promote safe care of patients, including standardized patients, and maximize students' development of skills, knowledge, and attitudes needed to enter the practice of medicine.

Related LCME Standard: 9.3 Clinical Supervision of Medical Students

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 the student's level of training, and that the activities supervised are within the scope of practice of the supervising health professional.

Applicability & Scope

This policy applies to medical students in all phases of the curriculum.

Definitions

Patient – Includes patients whom the medical student encounters in the formal MD curriculum and volunteer experiences and standardized patients at the University of Arizona Health Sciences Interprofessional Clinical & Professional Skills Center

Direct Supervision – The supervising physician is physically present (or continually on virtual telehealth visits) with the student and the patient

Indirect Supervision – The supervising physician is not physically (or continually on virtual telehealth visits) present with the student and the patient but is immediately available to provide direct supervision (or to join the telehealth visit) upon request, thus requiring that the supervising

physician remain physically present within the hospital or other site of patient care. The supervising physician may include any member of the physician healthcare team, including residents, fellows, and attending physicians. There are also situations in which it is appropriate for a nurse or other healthcare provider to provide direct supervision as long as the specific clinical activity falls within their scope of practice as specified below.

Supervising Physician – An attending physician employed by the COM-T; a community/rural attending physician with an associate faculty appointment at the COM-T; a resident or fellow physician training in a graduate medical education program at or associated with the COM-T

Policy Statement

Supervision of medical student learning experiences involving patient care is provided on clerkships and other clinical courses by members of the college's faculty. Faculty oversee the clinical curriculum by setting expectations for appropriate physician healthcare team members about the level of student supervision required with patient care activities and the level of responsibility delegated to the student. Clinical experience and clerkship directors are responsible for communicating supervision requirements according to a student's level of training to members of the physician healthcare team. These teams are made aware of student clinical expectations, the level of student supervision, and the level of responsibility given to a student according to the student's level of training.

When a medical student is participating in a private practice setting in which allied healthcare providers are present, it is the responsibility of the supervising faculty physician to assure that the allied healthcare providers are appropriately credentialed and capable of medical student supervision within the scope of their practice.

When a medical student is participating in a hospital-based practice, it is assumed that all allied healthcare providers employed are appropriately credentialed by the hospital and capable of medical student supervision within the scope of their practice.

While supervision will need to be defined by the clinical environment and patient care activity, the following supervision is required for physical exams and procedures.

I. Physical Exam Supervision

A. Students must be equipped with the basic skills necessary to perform general physical exam techniques commensurate with their level of training as they enter the clinical training environment. At the discretion of the physician healthcare team, and in accordance with course-specific guidelines, students may perform general physical exam techniques under indirect supervision, excluding techniques defined as "sensitive." There are physical exam skills that are considered sensitive and must be performed under the direct observation of a chaperone, even if the physician healthcare team determines that the student has the skills to perform these exams under indirect supervision. The chaperone is a silent observer and a third party in the exam room. The chaperone supports the patient as well as the learner performing the exam. The goal of having a chaperone in the room is to ensure safety for all. Sensitive physical exam

skills include—but are not restricted to—external genitalia exam on any patient, rectal exam on any patient, and breast exam. Pelvic examinations must always be performed under the direct supervision of a member of the physician healthcare team. This policy also applies to Standardized Patients.

- 1) HSIB Interprofessional Clinical & Professional Skills Center (iCaPS) Setting
 - a) It is recommended that the chaperone be the same gender as the standardized patient, but the standardized patient may pre-approve a chaperone of the opposite gender if necessary. It is recommended that a standardized patient who identifies as trans or non-binary be able to preapprove an available chaperone that is a gender of their choosing should the setting permit the option.

2) Clinical Setting

a) The clinical setting can present specific challenges to providing a chaperone for sensitive exams due to various factors such as location and staffing, requiring that adaptations be made at the discretion of the supervising faculty physician. It is recommended that the chaperone be the same gender as the patient, but in special cases patients may pre-approve a chaperone of the opposite gender. It is recommended that a patient who identifies as trans or non-binary be able to choose a chaperone that is a gender of their choosing should the clinical setting permit the option. Ultimately, it is the responsibility of the supervising faculty physician to ensure there is an appropriate chaperone for both their student and patient and can make modifications at their discretion.

II. Procedures Supervision

A. Students may only perform procedures with direct supervision by a member of the physician healthcare team or another health professional so long as the procedure is within that professional's scope of practice (e.g., a nurse supervising a venipuncture).

III. Guidelines for Reporting Violations

- A. If any member of the physician healthcare team has concerns about violations of the Supervision of Medical Students in Clinical Learning Situations Policy, they must contact the clinical experience or clerkship director for immediate investigation of the situation. The clinical experience or clerkship director is responsible for notifying the Office of Curricular Affairs of any suspected violations of the Supervision of Medical Students in Clinical Learning Situations Policy.
- B. Students may express concerns about the adequacy and availability of supervision via student evaluations of their clinical learning experiences, which are regularly reviewed by the Office of Curricular Affairs. Students are also encouraged to discuss any concerns with clinical learning directors, clerkship directors, House Deans and/or Associate Dean for Student Affairs, or the Office of Diversity, Equity, and Inclusion. These parties are required to report the issues, as anonymized as possible, to the Office of Curricular Affairs so that office may address and resolve the issue. Students will not be downgraded or in any other way penalized or retaliated against for reporting concerns about suspected violations of the Supervision of Medical Students in Clinical Learning Situations Policy.

Revision History

6/7/2023: Tucson Educational Policy Committee approved revisions to the policy, including adding a patient definition and clarifying requirements for chaperone gender.

6/2/2021: Tucson Educational Policy Committee approved revisions to the policy.

10/17/2012: Policy approved.