
	Number <b>13001.101</b>	Title <b>Medical Staff Preceptees                  Application, Roles, Responsibilities, and Patient                  Care Activities</b>			
Departments Affected: <i>Hospital-wide</i>		Effective Date 11/01/02 03/07/16 04/14/17	Revision Date 07/23/14 01/01/16 02/08/17	Review Date 07/23/14 01/01/16 02/08/17	Page 1 of 6
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**I. POLICY:** It is Sheridan Memorial Hospital’s (SMH) responsibility to promote patient safety, determine that preceptees are practicing within their appropriate level of competency, and assure that preceptees have an involvement in patient care and an optimal education experience.

**II. DEFINITIONS:**


- A. **Preceptee:** A practitioner trainee or student who is doing a clinical at Sheridan Memorial Hospital, and who is affiliated with an approved training program. Preceptees include Medical Students (MS): Clinical MS year 1&2 and for-credit MS year 3-4; physician interns, residents and physician assistant, and nurse practitioner students.
- B. **Supervising Physician:** One physician, or a group of physicians (Hospitalists), who hold Active or Consulting staff member unrestricted clinical privileges at Sheridan Memorial Hospital. They have immediate oversight responsibility of all aspects of patient care rendered by the preceptee. In most cases, the Supervising Physician is the attending physician or consultant on the case.
- C. **Supervision:** All practice performed under the direction of the overseeing medical staff member, or their designee, and in accordance with the Staff Bylaws, Rules and Regulations.
- D. **Observational Preceptees:** Include high school students in a training program, with a school agreement and proof of insurance, and who wish to observe an SMH privileged physician assistant, or nurse practitioner at SMH. They are under the direct supervision of their physician sponsor(s) and may function in an observational capacity only without the ability to provide any direct or indirect patient care. An observational student will not be allowed to have any contact with the patient about the patient’s medical status or care, or have physical contact with the patient without the presence of their Supervising Physician. A patient and/or family member(s) should verbally consent to receive care observed by the observer. They will not be involved in the performance of any procedures and will not make any entries in any patient chart.
- E. **Clinical Preceptees:** Include Clinical year 1-4 medical students, physician assistants, nurse practitioner students, physician interns who are training under the direction of a Supervising Physician with an ongoing training program, approved by the appropriate Department Chair, and described in a written agreement between the Department and the preceptees’ training program. Clinical preceptees are not members of the Medical Staff or Non-Physician Professional staff, and will not be granted

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clinical privileges, but may provide such patient care services as are dictated by the preceptee's academic institution and must be agreeable to Sheridan Memorial Hospital (Medical Staff Bylaws Article VII)

**III. PROCEDURES:**


- A. This procedure applies to observational and clinical preceptees only, an does not apply to licensed independent physicians, other students in health related fields, such as nursing students, physical therapy students, radiolog technologist students, or pre-medical students that are not currently enrolled in an accredited training program. Please refer to the Medical Staff Bylaws or Human Resources for the procedures in this regard.
- B. Preceptees must be associated with academic programs that have a fo written affiliation agreement with Sheridan Memorial Hospital as a clin training site.
  - 1. The preceptee or his/her academic institution that has an affiliation agreement with Sheridan Memorial Hospital, and proof of liabili insurance, will notify the Medical Staff Services Department of the preceptee's clinical rotation plans, Supervising Physician(s) and ob application materials.
    - a. A copy of the affiliation agreement, or training institution letter of agreement, will be reviewed to verify preceptee, Hospital, and education facility responsibilities.
    - b. Sheridan Memorial Hospital will assist preceptees with hous needs to the extent dictated by the agreement between Sheridan Memorial Hospital and the preceptees' academic p
- C. The Medical Staff Services department verifies the credentials of the preceptee to include licensure status, as required by the State of Wyoming, and in line with training program requirements.
- D. Prior to a rotation, preceptees works with the Medical Student Coordinator t complete the Hospital Human Resource orientation items as necessary.
  - 1. Elements of this orientation include the code of conduct, emergency procedures and code designations, confidentiality agreement, background investigations consent, drug screening policy, hospital safety and blood borne pathogen training, EMR orientation, fit testing and submission of current immunization reco
- E. Preceptees will be issued Hospital name tags and are expected to wear appropriate attire during their time on-site. Preceptees are required to return their name tags at the completion of their rotation, along with keys to housing facilities offered by SMH, as instructed a

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- F. Hospital staff will be notified of long term preceptees, prior to the beginning of the rotation period, to include the preceptee’s name, rotation description specialty, location, training institution, program name, time frame, an Supervising Physician(s) assigned. Designated Hospital Leaders have the authority to prohibit approval of preceptees for good
- G. The Medical Student Coordinator or designee will provide preceptees with a tour of Sheridan Memorial Hospital facilities
- H. Supervising physicians will provide preceptees with constructive feedback on the preceptee’s performance, which will include a formal written evaluation, as required by the preceptee’s academic institution, as well as continuous feedback to the preceptee
- I. Observational Preceptee Experience
  - 1. A member of the Medical Staff may request permission, through Medical Staff Services Department, for a student to accompany him/h in their daily work.
  - 2. Observation within restricted areas of the hospital (e.g. Surgery, Intensive Care Unit (ICU), Women’s Health (WH)) shall request of the medical staff member, with approval of Manager or de
- J. Hospital staff and Departments will report any patient safety or quality of care issues involving preceptees to the Quality and Medical Staff Services Departments, who will in turn advise the Chief Medical Officer and the Chief of Staff for Medical Executive Committee review. The Chief of Staff a Medical Officer will oversee the resolution of any issues that arise. Im action will take place to correct a situation where a preceptee’s actions endanger patient care.
- K. In the event that supervision is felt to be inadequate, Department Chair will review the situation. If it is determined Supervising Physician failed to appropriately supervise the practitioner may forfeit their ability to supervise the s
- L. **Roles, Responsibilities, and Patient Care Activities** The scope of the preceptees’ roles, responsibilities, and patient care activities act the Medical Staff and are in accordance with the precept program level of training, federal (Centers for Medicare Services (CMS)), Wyoming state laws, and Sheridan Memorial Bylaws, Rules and Regulations, and Policies.
  - 1. Appropriate to their level of training, preceptees **may evaluate patients in the hospital**, affiliated practices, outpatient departments and emergency department; make patient rounds on the units, see


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- appropriate consults, attend routine deliveries, and be in attendance at surgical procedures.
- 2. Appropriate to their level of training, preceptees may assist at surgery, and during other invasive procedures, only if the preceptee has received approval from the Supervising Physician and/or operating surgeon, based upon documented evidence of a surgical rotation an instruction during his/her academic training, and under the direct supervision and physical presence of a Supervising Physician, appropriate privileges, and after orientat
- 3. Appropriate to their level of training, preceptees may perform medical history and physical examinations (H&Ps), as a learning experience under the supervision of the requesting physician, or a designated member of the medical staff, who has agreed to serv  
 Supervising Physician.
  - a. **Exceptions:** Physical examinations may not be performed unless the Supervising Physician is present on critically ill patients, I patients, or Emergency Department patients, unless the patient’s primary attending practitioner gives permission. Patients mu give consent to the interview and examinat
- M. **Documentation** within the **medical reco** follows regulations specific to CMS and billing service regulations
  - 1. When physicians are billing for services, those services must have been performed by, and documented by, the billing physician, rather than the preceptee
  - 2. Attending and consultant physicians must document that they, rather than the preceptee, have personally performed the ke each medical encounter.
  - 3. Observational students are not allowed to document in the medical record.
  - 4. Medical students year 1-4, Physician Assistant and students who choose to document in the medical record, as a learni experience, will function under the Supervising Physician and must have the H&P and diagnostic and treatment orders submitted as proposed orders within the medical record. These proposed orders wi then be reviewed and signed by the Attending or Supervising Physician, prior to being carried out, and within 24 hours. In Supervising Physician will review, sign, and document acceptance of orders and prescriptions with the preceptee.
  - 5. Interns and Residents, appropriate to their level of training, may be

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allowed to dictate their findings; perform and dictate history and physical examination; write admission and discharge notes; or prescriptions; and write progress notes and orders in the medical record for both Inpatient and Outpatient areas under the following guidelines:

- a. Orders are treated as standard orders, co-sign Supervising or Attending physician, within time limits set forth by the Hospital and CMS Rules and Regulations.
- N. **All aspects of patient care are ultimately the responsibility of the Supervising or Attending Physician and involved consultants.** Appropriate to their level of training, the Supervising Physician, and/or of Physicians, will assess the capabilities of the preceptee and assign responsibilities according to the following:
1. Attending physicians have the right to prohibit preceptee participation in the care of their patients without penalty.
  2. When allowing care for their patients by preceptees, attending physicians and consultants do not relinquish their rights or responsibilities to examine and interview; admit or discharge; write orders, progress notes and discharge summaries; and obtain consultations.
  3. Preceptees will work under the direct supervision of physicians who hold clinical privileges that reflect the patient care responsibilities given to the preceptee (e.g. a preceptee who is allowed to take a history and physical must be supervised by a practitioner with H&P privileges).
  4. The mechanisms by which the supervisor shall make decisions about each participant's progressive involvement and independence in specific patient care activities include
    - a. Direct observation of the preceptee by
    - b. Consultation by the supervisor, with the preceptee and other caregivers working with the preceptee, regarding the preceptee's performance
    - c. Review of the preceptee's documentation in patients' medical records by the supervisor
    - d. Proctoring of the preceptee by the supervisor in specific patient care activities
    - e. Simulation of specific patient care activities
    - f. Testing the preceptee regarding specific patient care activities
- O. **Qualifications of a Supervising Physician** include the following
1. Maintain Active or Consulting Medical Staff membership and privileges

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- in good standing at SMH
- 2. Be familiar with the core curriculum of the preceptee's respective program
- 3. Accept the responsibility for onsite supervision of preceptee
- 4. Evaluate all patients seen by the preceptee
- 5. Assure that the documentation in the patient's medical record is appropriate
- 6. Agree to abide by the content of this procedure and associated regulations.

P. **It is the preceptee's responsibility to communicate effectively** with his/her Supervising Physician(s) regarding the following:

- 1. The findings of his/her evaluation, physical examination, interpretation of diagnostic tests and intended interventions on a continuous basis
- 2. Any change in a patient's condition, by notifying the appropriate attending or consulting physicians

Q. Preceptees may attend Medical Staff department/committee meetings at the discretion of the Department Chair (not including executive sessions), but may not vote on matters brought before the Medical Staff.

R. Preceptees are expected to attend and participate in Medical Staff educational activities offered during their SMH clinical rotation.

**IV. ATTACHMENTS:**

- A. None.

**V. RESOURCES:**

- A. The Joint Commission, Medical Staff Standards MS 04.01.
- B. CMS, Department of Health and Human Services Guidelines for Teaching Physicians, Interns, and Residents
- C. WY Board of Medicine Rules and Regulation
- D. Sheridan Memorial Hospital Medical Staff B

**VI. DISCLAIMER (As applicable)** Clinical situations may warrant adaptation due to unique patient characteristics and will be evaluated on a case by case basis

**VII. PREVIOUS VERSIONS:**

- A. MSA 0050 - Preceptee



# Sheridan Memorial Hospital

## POLICY ACKNOWLEDGEMENT

I have read and agree to adhere to the conditions of the Medical Staff Preceptee Policy, outlining the roles, responsibilities and patient care activities. I also acknowledge that any violation of the above conditions can result in disciplinary action up to and including termination.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE