SIU UNDERGRADUATE MEDICAL STUDENT EHR DOCUMENTATION HSHS ST. JOHN'S EPIC INPATIENT EHR EDUCATION

General Access and Privileges of Medical Students: All EHR systems Second Year Students:

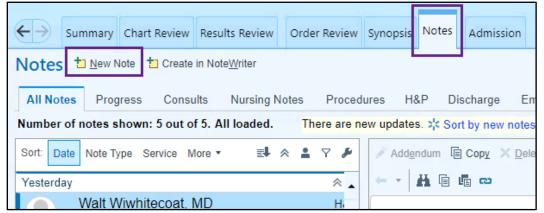
- Y2s have documentation privileges in an educational EHR environment which mirrors the live TouchWorks system, but does not interface with the live/clinic system.
 - The work done in this system is associated with standardized patient encounters hosted in the simulated patient lab as well as periodic SOAP note assignments received by their nurse educator(s).
- Y2s have full access to "view" patient medical records in the TouchWorks live/clinic environment beginning in August. They receive access to Powerchart (Springfield Memorial Hospital) in September each year and Epic (HSHS St. John's Hospital) in May of their second year.
 - If needed, Y2 students assigned to St. John's mentors can receive access ahead the regularly scheduled May training.
 - Y2 students assigned to Springfield Clinic mentors are granted access to "view" patient medical records in Athena as needed.
 - Students with SIU mentors may document, at the discretion of the physician, within the physician note (see workflow below).

Third and Fourth Year Students:

- Y3s and Y4s have EHR documentation privileges in TouchWorks, Powerchart, and Epic. They are granted access to "view" patient medical records in Athena as needed.
 - Students may contribute to the E/M billing document of the day as described below.
- Medical students will not document under someone else's user name or password.
- Any contribution and participation of a medical student to the performance of a billable service must be performed **in the physical presence of a teaching physician or physical presence of a resident** in a service meeting the requirements set forth for teaching physician billing.
 - Their documentation cannot be used during use of primary care exception.
 - Ex: Third year general medicine resident able to see patient without physical presence of a faculty in the room.
 - Their documentation cannot be used for admission H&Ps or discharge summaries.
 - Their documentation cannot be used for procedural documentation.

What all medical students need to do in the live Epic environment:

• A medical student may contribute to any section of the daily note by starting/opening the progress note via "new note."



- Once they have selected new note, they will have the option to choose:
 - 1: "Progress Note" from the list of options.
 - 2: "Service" which will describe the location of care/focus of their note.

es.	Sidebar Summary Edit Note
3	My Note 🗨 💟
	Note Details
	Date of Serv <u>i</u> ce: 2/4/2025 📄 0752 🔊 Type: 🕒 🔎
1	Service: 2
	Cosign Required?
	Summary:
	★ B D → S S II + Insert SmartText = ← → = O

Note Details	
Date of Service: 2/4/2025 🔒 0752 🔊 Type: Note Type 👂 Service:	9
Title	Number
Intervention - Mental Health	500007920
Intervention AODA	500007903
Lactation Note	42
Mental Health Legal Form/Note	500007911
Multidisciplinary Treatment Plan - SR	500900
Multidisciplinary Treatment Plan Review - SR	500901
Nursing Note	70
OB ED Provider Note	1020001
Op Note	1000004
OR Assist	10700001
OR Nursing	10
OT/PT/SLP Initial Assessment	5000600
Patient Care Conference	1000002
Plan of Care	1000001
Post-Sedation Assessment	3040002
Procedures	3
Progress Notes	1
Provider Student Note (The content of this medical student note is for educational purposes only and is not utilized to guide patient c	500007915
Psych-Social History AODA	500007900
Psych-Social Treatment Plan AODA	500007904
Psychiatric Evaluation	500007919
Psychological Evaluation	500007910
Psychological Progress Note	500007908

• For the emergency department, they will choose "ED Provider Notes" from the list of options:

←→ Chart Re R	esults Summary 💿 Review V 🔠 Triage 🚺	🙀 Workup 🤬 My Note 🗊 Orders 💌	æ
My Note			⊘ 🗙
MYNOTE	🗊 ED Provider Notes 💉	0,	F 🔺
Medical Student Tele-Intake Sepsis Timer		Notes Activity 🧃	
	Medical Student Note 🕜	0 /	p.
	Create Note	Notes Activity ₹	
	⊞ Tele-Intake 💉	-	9
	- New Deadlas	Flowsheets	a 📘

 Note: If directed by ED clerkship/faculty, students CAN use the "Medical Student Note" option for practice **Practice H&P note writing:** Student can use medical student notes and it will not be a part of the billable service:

- In notes activity, choose Note Writer.
- Choose Provider Student Note.
- Then choose note type H&P.
- This will then be shared with faculty for co-signature.

Summary Chart Review Results Review	Order Review Synopsis Notes Admission			
★ New Note ★ Create in Note				
t <mark>es</mark> Progress Consults Nursing	- Notes Procedures H&P Discharge Emergency Plan of Care Periop Events Medical Student ACP Transcriptio	ons Incomple		
of notes shown: 5 out of 5. All loaded				
ate Note Type Service More 🕶 📑	Select Note Type & Template			
	Select a note type:			
ay	[
Walt Wiwhitecoat, MD Emergency Medicine Date of Se	Title	Number		
Emergency medicine Date of oc		4		
Jim Ilurgent, MD ED	Progress Notes	1		
Emergency Medi Date of Se		2		
Colon lloscopy, MD Anesthesi		3		
Gastroenterology Date of Se	H&P	4		
Deb Ilgurney, RN Emergency Medi Date of Se	ED Notes	6		
Colon lloscopy, MD Gastroenterology Date of Se	ED Provider Notes	19		
Gastibenterology Date of Se	Pre-Sedation Assessment	3040001		
	Discharge Final Progress Note	500007913		
	Provider Student Note (The content of this medical student note is for educational purposes only and is not utilized to guide patient care.) 50000791			

• The General H&P option under Provider Student Note is available for practice H&Ps:

Select Note Type & Template × Select a note type: Provider Student Note (The content of this medical stud... Select a NoteWriter template: O ADULT DAILY PROGRESS NOTE O PEDIATRIC DAILY PROGRESS NOTE GENERAL H&P O NICU ADMISSION ○ HSHS IP GEN MEDICAL DISCHARGE SUMMARY ○ IP BEDSIDE PROCEDURE NOTE ○ PROGRESS NOTE WITH ROS AND PE O HSHS CONSULT ○ HSHS SEPSIS FOCUSED EXAM ○ HSHS IP FINAL PROGRESS NOTE O ED MEDICAL STUDENT NOTE O Blank Note <u>C</u>ancel <u>A</u>ccept

• Once their portion of the billable note that they have contributed to with a resident and faculty is complete, **the student will add their signature smart phrase: Medstudstatement**

Sidebar Summary Edit Note	
My Note 🗨	<u>4</u> 💟
Progress Notes • Critical Care • 2/4/2025 1252 • 🖧 Requires Cosign	⊗
Summary:	
😫 B 🕀 🧐 🤹 🔄 🕂 Insert SmartText 🖷 🗢 🖶 📿 🐴 🗈	
Note Text or Template entered here.	
Add SmartPhrase Medstudstatement	
I participated in the documentation of this service as a medical student. Orioles, alex 2/4/2025 12:53 PM	

- By adding the smartphrase, the name of the medical student involved in the care will be inserted and time stamped.
- They will then "share" the note to allow for a resident and/or attending to contribute to the note.
- The student will not edit the note after the physician signature.

What teaching physicians need to do when working with medical student documentation:

- The faculty must verify all student documentation or findings: history, physical exam, and/or medical decision making.
- The faculty must personally perform (or re-perform) the physical exam and medical decision-making activities of the E/M service being billed.
- To review student/resident documentation in Epic, you can hover over the documentation to identify the author and review it:
 - 1: Select any note in Chart Review, Notes, or Doc Review.
 - o 2: Click on "Hover for Details."
 - o 3: Hover over the content of the note you want to review.

Chart Review		
Encounters Lab Path Imaging	Procedure Pulmonary/Sleep Cardiology Other Orders M	Medications Media Referral Orders Episodes Letters Hosp/NH Notes/Trans Referrals LDAs
Preview - CRefresh (10:55 AM)	w Selected ■C Route Selected Rarely Used ▼	
▼ Eilters Exclude Me St. John's Me	dical Discharge Hospital Notes Unsigned Notes Hos Physicia	ian/PA/NP HSHS Filter Scans Procedure Notes
Date of Service Type	S Author	Encounter Type 🗧 🕆 🖸 👪 🖶 🖷 📼
its		Alex Redsox Progress Notes 🛕 🖳
Today at 10:53 🔶 Progress Notes	🗎 Me 🚺	Cosign Needed Hospitalist
Yesterday at 07:54 H&P	Wiwhitecoat, Walt, MD - Physician - Emergency Medicine	ED to Hosp-Admissi Date of Service: 02/04/25 1053 Creation Time: 02/04/25 1053
Yesterday at 07:43 ED Provider Note	es 📋 Ilurgent, Jim, MD - Physician - Emergency Medicine	ED to Hosp-Admissi Expand All Collapse All
Yesterday at 07:39 Anesthesia Post-o	op Foll 📋 Iloscopy, Colon, MD - Physician - Gastroenterology	Dep to Hosp-Admissi Charlie Redsox is a 60-year-
Yesterday at 07:37 ED Triage Notes	Ilgurney, Deb, RN - Registered Nurse - Emergency Medic	ED to Hosp-Admissi old male patient. Show: Clear all
Yesterday at 07:01 Consults	Iloscopy, Colon, MD - Physician - Gastroenterology	ED to Hosp-Admissi
		Alex Redsox
		🗹 Hover for details 🖉
		Patient Active Problem List
		Diagnosis Diabetes type 2, controlled (CMS/HCC 02/03/2025
		HHS/HCC) • Acute gast <u>lic ulcer with bemorrhade but</u> 02/03/2025
		without obs SmartLink PROBL Hypertensi 02/03/2025
		inserted by Alex Redsox
		Past 1 3 at 02/04/25 1053 last refreshed by Alex Redsox
		No Known Al at 02/04/25 1054
		Charlie's height is 1.800 m (5 10.98) and weight is 86.2 kg (190 lb). His oral temperature is 98.6 °F (37 °C). His blood pressure is 100/60 and his
		pulse is 80. His respiration is 20 and oxygen saturation is 99%.

- To review content that was copied and pasted from another source, such as a previous note, click:
 - 1: "Copied" option and hover over the content you want to review.
 - 2: Will display who copied the content and where it was copied from.

Patient Active Problem List				
GI bleed Hypertension	Date Noted		Show: Written Templated	Clear all
 Diabetes type 2, controlled 			Witten Diemplated	Copied
Past Surgical History	Laters lite		Added by: EMP- TRN080	
Procedure Hernia repair	Laterality	Date	Z EMP- TRN081	
Review of Systems			✓ Hover for details	ş
	gative except for: Gastrointestinal:	: positive for abdominal pain and vomiting		
objective: at 03/08/16 0754				
Vital signs ir from outside the chart	-			
		e source Oral, resp. rate 26, height 5' 11" (1.803 m), weight 190 lb	(86.183 kg), SpO2 96.00	1%.
Abdomen: abnormal findings: distended, gua	arding hyperactive bowel sounds	and moderate tenderness in the epigastrium		

Assessment/Plan:

• In the Notes Activity, the attending can select a resident's name and their documentation will display:

← → C H 品 価 ® ASSESSMENT:			_
ADHD, predominantly inattentive type, stable.			
PLAN: Continue current ADHD medication(s).			Show: Clear all Written I Templated Copied
Assessment/Plan: Principal Problem: GI bleed Active Problems: Diabetes type 2, controlled			Added by: Chris Cabbage, MD EMP- TRN080 EMP- TRN081
Upper endoscopy. GI Consult for Upper GI Bleed			🗹 Hover for details 🛛 🖉
Electronically signed by Sam Ilstethoscope, MD at 02/03/25 0758 Electronically signed by Walt Wiwhitecoat, MD at 02/03/25 1322 Electronically signed by Chris Cabbage, MD at 02/04/25 1133 Electronically signed by Chris Cabbage, MD at 02/04/25 1135			
Note Details			
Author Chris Cabbage, MD Author Type Physician	File Time Status	02/04/25 1135 Addendum	

• In the Notes Activity, the attending can select a medical student's name and their documentation will display:

4				
	General Appearance: Vital signs: (most rece Ib), SpO2 99%. Output: Producing uni Assessment & Plan Redsox, alex 2/4/2025	ent): Blood pressure 100/60, pi ne.	e 80, temperature 98.6 °F (37 °C), temperature source	e Oral, resp. rate 20, height 1.803 m (5' 10 98'') weight 86.2 kg 🗐 🛣 Show: Clear all Written Verifier Templated Copied Added by: Adex Redsox Hover for details
	Note Details Author Author Type Last Editor Hospital Acct #	Alex Redsox Medical Student Alex Redsox 1011971	File Time Status Service Admit Date	02/04/25 1141 Cosign Needed Addendum Hospitalist 2/3/2025

Attestation:

• Once documentation is reviewed, the faculty must add the following attestation:

Nam	те		Description			C
☆ Med	DICALHX		History - Past Medical History			
		ORDSPHR	Facility name: *** Request Electronic or Paper: *** Date of	Servi		
🛱 MEC	DICALSTUE	DENTSTAT	Medical Student Statement created for CHG0093166			
-						
		1.5				
		.medical	s			
		Redsox, 2/4/2025				
		2/4/2023				
						•
		C Smart	Links	😒 <u>P</u> end	✓ <u>S</u> ign	× <u>C</u> ancel
		1				

• By clicking the attestation, this will be added to the note:

"A student assisted with the documentation of this service. I saw and personally examined the patient and reviewed and verified all information documented by the student and made modifications to such information, when appropriate."

• If both a medical student and a resident document within the note, the faculty attests to both the student's documentation AND the resident's participation in the care of the patient as shown below:

Ľ	•	Name	Description C
	삶	RESIDENTDOCREVIEW	I have reviewed the progress note documented by the resident/inte
B	☆	RESIDENTDOCUMENTA	Physician's attestation for resident
t	ra	is is how the text anslation will look for th:	tLinks ★ B ⊕ ★ 5 @ + Insert SmartText = ← → = C

C SmartLinks

🔹 <u>P</u>end 🔽 <u>S</u>ign 🗙 <u>C</u>ancel

• The faculty must sign and date their documentation.

Faculty can give verbal note feedback:

• There is no way to "task" feedback electronically between students and faculty in Epic.

General scenarios that satisfy the physical presence requirement:

- Student sees patient alone and obtains history, physical exam, medical decision making (this may be more common on outpatient):
 - Medical student may contribute to documentation.
 - Resident and/or faculty **MUST** see the patient, verify history, re-perform physical exam and medical decision making, reviews all and places **BOTH** medical student and standard resident attestation to note before signing.
- Student and resident see patient together, obtain history, physical exam, medical decision making (this may be more common on inpatient):
 - History, physical exam and key decision making takes place together.
 - o Medical student may contribute to documentation, resident contributes.
 - Faculty **MUST** see patient, verify history, re-perform physical exam and medical decision making, reviews all and places **BOTH** medical student and standard resident attestation to note before signing.
- Student, resident and faculty all go into exam room together at the same time (may be more common on inpatient):
 - History, physical exam and key decision making all takes place together.
 - Medical student may contribute to documentation, resident contributes, faculty reviews all and places **BOTH** medical student and standard resident attestation to note.