University of Pittsburgh School of Medicine

Policy on Clinical Supervision

I. POLICY
UPSOM recognizes that active involvement in clinical learning situations is essential for medical student learning and growth. UPSOM will provide supervision of medical students in all clinical areas to ensure quality education as well as patient and student safety.

The central administration of medical education expects each department to be responsible for ensuring student and patient safety in the required clinical experiences of their clerkship.

At each clerkship orientation, students must be informed of the expectations for their participation and supervision in patient care. Clerkship directors are responsible for informing faculty and residents of these same expectations.

Clerkship directors are responsible for assigning students to designated faculty and resident supervisors for all clinical experiences and for ensuring that faculty, residents, and students are made aware of these assignments.

The amount of supervision required for each student will vary according to the clinical nature of each patient, and be commensurate with the level of training, education and experience of the student that is involved with the patient’s care. Supervision is intended to foster progressive responsibility. While engaged in clinical rotations or clinical activities associated with prescribed course work, medical students should be incorporated into and accepted as an integral part of the team, permitted to participate in team care of the patient, and expected to demonstrate individual ownership of patient care responsibilities.

Clinical faculty must supervise medical students appropriately at all times. Medical students are not allowed to perform invasive procedures unassisted, uninstructed, or unattended. Clinical faculty should assign individual student activities consistent with the student’s abilities and trainee status. Students must be provided with rapid, reliable systems for communicating with supervising faculty and resident physicians.

Where clinically and educationally appropriate, physicians who are supervising medical students may delegate responsibility for some elements of teaching and supervision to residents, fellows or other health care providers (e.g., physician assistants, nurse
practitioners, certified registered nurse anesthetists, nurses, etc.) within the institution. It will be the responsibility of each supervising physician to determine which learning experiences are appropriately delegated and to ensure the individuals providing such supervision are working within their scope of practice.

II. PURPOSE
It is essential that medical students are properly supervised in clinical learning situations involving patient care, in a manner that is appropriate for their level of training and ability, and that assures the safety of the involved patients.

III. SCOPE
This policy applies to:
• Clerkship directors
• Clerkship faculty, residents and fellows
• Other health care providers who supervise medical students
• Medical students

IV. POLICY AUTHOR(S)
• Office of Medical Education

V. RELATED POLICIES AND PROCEDURES
None

VI. REFERENCES
LCME Element 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 his or her level of training, and that the activities supervised are within the scope of practice of the supervising health professional.

VII. APPROVALS
Curriculum Committee
Education Policy Council
Executive Committee
Dean, School of Medicine, February 5, 2018