

YEARS 1 & 2 ELECTIVE COURSE

TITLE: Scribe Program Preclinical Elective

COURSE NO.: SOMN 716

DEPARTMENT: Emergency Department, Department of Oncology, Department of Family Medicine

DURATION: Eight 4-hour shifts during pre-clinical years

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COORDINATOR: Scribe Club President
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SEMESTERS

AVAILABLE: Fall – Spring

Students may apply to participate during the first semester of their first year of medical school and may continue to apply throughout their second year.

LOCATION: University of Toledo Medical Center, Emergency Department, Department of Oncology, Department of Family Medicine

FACULTY

PARTICIPANTS: Emergency Department Physicians, Department of Oncology and Family Medicine Physicians

GENERAL DESCRIPTION:

A scribe is a medical student who would like to work in a clinical environment to gain early exposure to clinical medicine. The principle duties of a scribe include: free text documentation of chief complaint and history of present illness, documentation of physical exam, past medical history, social history, family history and lab & imaging data. The scribe accompanies the physician into the exam room to hear the patient's history of present illness and chief complaint. The scribe takes down this information on a pad of paper and reviews it with the physician while exiting the room. The scribe then types this information as a free text note into the patient's electronic medical record. While in the exam room, the scribe takes notes on the pertinent physical exam findings. The scribe also notes which findings are normal and abnormal.

This information is reviewed with the physician while exiting the patient's room. The scribe then works through a "quick click" documentation screen, which often requires the use of addendums to thoroughly detail the exam. The scribe is expected to alert the physician when lab results or imaging study data are available to be viewed. The scribe can also document all procedures performed, consultations ordered and changes in patient's course of care and response to treatment. The scribes assist the physicians with improving efficiency in the emergency department because the physicians are able to spend more face time with each patient and can access the next patient more quickly. This aspect of a scribe program improves workflow and patient satisfaction. The scribe adheres to the workflow design established for the emergency department and meets all job performance standards. The scribe performs other duties as assigned.

EDUCATIONAL OBJECTIVES:

As a scribe, the medical student has the chance to work side-by-side with the physician, seeing many patients per hour. The first or second year medical student would not normally have a chance to see these patients until their clinical rotations during their third and fourth year, so this early clinical exposure is a great way to expand their growing knowledge base. When the medical student scribe does begin rotating during the clinical years of medical school, he/she will be much better prepared to understand medical jargon, work with the hospital's computing system, and more importantly, provide the best patient care possible. As a result of early exposure to doctor-patient interactions, the medical student can begin to understand the different styles with which physicians provide care and begin to form his or her own opinions about how they would like to provide care and in what specialty of medicine they would like to plan a career.

Additionally, the peer interactions that the medical student scribes are privy to surpass those present in simulated clinical exercises. With a secure Google Form, the members of the scribe program are asked to share their thoughts, experiences, hardships and excitement about scribing within one week of completing each shift. One student may choose to share what she learned about pneumonia in the elderly, while another student might explain how to chart on a trauma patient brought in by Life Flight. With access to the hundreds of entries written by fellow scribes, each participant can share and learn from the experiences of their peers. This early collaboration between medical students is essential to a future of working with colleagues from many realms of medicine. This form is closely monitored by ED faculty physicians and Scribe program members. The students will be carefully instructed how to compose these entries without violating HIPAA guidelines in any way.

METHODS OF TEACHING:

The initial instruction for the medical student scribe will come from a training shift scribe orientation in the Emergency department with a senior member of the scribe program. This will enable the scribe to understand the emergency department charting system, ED workflow, and their responsibilities as a working member of the ED. Similar training will occur in the outpatient setting.

METHODS OF STUDENT EVALUATION:

Students will be evaluated based on scheduled shift and mandatory meeting attendance, faculty feedback, timely completion of their Scribe Log entry, professionalism and academic standing. A student who cannot attend a shift must make arrangements for another scribe to cover this shift with advance notice of 24 hours to both the student covering the shift and to one of the senior members of the program. The senior members, however, will not be responsible for finding a replacement; the scribe must do this on their own. A scribe who does not make these arrangements and leaves a shift uncovered without an extenuating circumstance will receive NO credit for this elective. For the success of the scribe program, it is of the utmost importance that our scribes are professional and on time. After completing at least eight 4-hour shifts and filling out the accompanying form for each shift, the current president, vice-president and advisor will determine if the student has completed the requirements appropriately.

ELECTIVE EVALUATION: Credit/No Credit based scoring.

PREREQUISITES: Before participating, the medical student will be asked to prepare a short essay regarding their interest in the program. The student will also be asked to fill out an application with references and past job history. The students will be screened and accepted by the current executive board. The scribe must hold and remain in good academic standing, with no current fails on their record. If the student has failed a course, they must have remediated it to participate. A notice of successful remediation and support from the course director will be asked of the student. The student should be familiar with Microsoft Word, Excel and PowerPoint and should have proficient typing skills. The student must also have the ability to handle and prioritize multiple tasks simultaneously and needs to possess excellent written and verbal communication skills. During the interview, these skills will be assessed with a scoring rubric. The scribe must have the ability to work with little supervision. The scribe must be able to occasionally provide assistance with lifting patients or other small physical tasks.

LINKS TO EDUCATIONAL PROGRAM OBJECTIVES (EPO'S):

MK-1 Knowledge of the normal structure and function of all organ systems

MK-3 Knowledge of underlying causes of common disorders and their pathogenesis

MK-4 Knowledge of altered structure and function (pathology and pathophysiology) associated with various diseases

MK-6 Knowledge of pharmacological basis of therapeutics

MK-7 Knowledge of scientific principles required to practice evidence-based medicine

MK-9 Knowledge of ethical principles that govern decision making in medicine

PC-1 The ability to obtain an accurate, relevant and complete medical history that covers all essential aspects of the history

PC-2 The ability to perform a physical examination that is both complete and accurate

PC-3 The ability to conduct an accurate, relevant focused history and physical in appropriate clinical situations

PC-4 The ability to document a patient encounter that is legible (if applicable), organized, concise, timely

and accurate

PC-8 The ability to construct appropriate common diagnostic and therapeutic strategies for patients with common conditions, both acute and chronic

PC-9 The ability to recognize emergency medical conditions and institute appropriate initial therapy

PC-10 The ability to retrieve (from electronic databases and other resources), manage, and utilize biomedical information to deliver safe and effective clinical care

PC-11 The ability to deliver care in interprofessional teams

PB-1 Ethical, responsible, reliable and dependable behavior in all aspects of their professional lives and a commitment to patients, society and the profession

PB-2 Honesty and integrity in all interactions with patients, families, staff, colleagues and others with whom students interact in their professional life

PB-3 Professionalism in dress, grooming, manner of speech and personal interactions with patients, families, staff, colleagues and others with whom students interact in their professional life

PB-4 Respect for the privacy and dignity of patients and their families

PB-5 Compassionate treatment of patients

PB-6 Knowledge of, and respect for other health care professionals, and of the need to collaborate with others in caring for patients as well as promoting population health

PB-7 Knowledge of key principles required for delivery of culturally competent care

PB-8 Professional maturity by appropriately managing conflicts, coping with personal and professional stress and showing flexibility in potentially ambiguous situations

IPC-1 The ability to communicate effectively in a timely manner, both verbally and in writing, with patients, patients' families, colleagues, and others with whom physicians must exchange information in carrying out their responsibilities

PBL-1 The capacity to recognize and accept limitations in one's own knowledge and clinical skills, and a commitment to continuously improve one's knowledge and ability through lifelong learning

PBL-4 The ability to utilize information technology in improving medical knowledge and delivering care to patients and populations

PBL-6 The ability to participate effectively in education of patients, their families and caregivers, other trainees, and other health professionals

PBL-7 The ability to apply fundamentals of basic sciences to clinical problems

SBP-1 Knowledge of the role and responsibilities of physician and other health care professionals in various models of health care organizations, and the impact of finances/economics on delivery of health care

SBP-2 Knowledge of impact of health care disparities in delivery of health care

FUTURE PLANS OF THE SCRIBE PROGRAM PRECLINICAL ELECTIVE:

Eventually, this program hopes to have students working within many departments of UTMC. We would like to have students working with each department to both learn their EMR system and help to make their charting more efficient. This expansion would enable our program to utilize many more medical students, thus further engaging our medical student population in early, real life clinical learning.