Policy Number	UME.AC.119
Policy Title	Perelman School of Medicine at the University of Pennsylvania Undergraduate Medical Education Program Policy on Use of Generative Artificial Intelligence
Effective Date	
Last Revision Date (if any)	
Scope	All in Undergraduate Medical Education (students, faculty, staff)
LCME Element(s) (if any)	

Perelman School of Medicine at the University of Pennsylvania Undergraduate Medical Education Program Policy on Use of Generative Artificial Intelligence

I. PURPOSE and BACKGROUND

This policy establishes consensus guidelines on the acceptable use of artificial intelligence (AI) technology at the Perelman School of Medicine (PSOM), balancing development of independent critical thinking with supplementation of AI while maintaining academic, ethical, and privacy integrity.

Integrating AI into the medical school experience can lead to significant efficiencies in teaching and learning. However, users should be cognizant of instances when inaccuracies of data, ethics of training and generation, release of patient data, over-reliance on AI prior to independent skill development, and violations of the University of Pennsylvania's (Penn) Code of Academic Integrity require guardrails for use. PSOM is committed to enhancing the educational experience with AI while promoting the development of individual critical thinking prior to the integration of AI.

Generative AI tools are predictive models, not discovery engines. They generate content based on statistical patterns, which may include inaccuracies or fabricated references. Using AI tools cannot replace human judgment, critical thinking, or accountability. AI tools may encompass bias, which may be harmful in clinical and educational contexts.

II. SCOPE

This policy applies to faculty, undergraduate medical education (UME) students, and staff at PSOM at Penn. Given the evolving nature of this technology, this policy describes current best practices but is not intended to be exhaustive. Students enrolled in Biomedical Graduate Studies (BGS) courses should reference BGS program policy and consult with their BGS course directors for additional guidance.

Definitions:
"Artificial intelligence (AI)" refers to the ability and development of computer machines to perform tasks that previously would require human intelligence such as recognizing patterns, synthesizing data, problem solving, and adapting to new information.

"Generative artificial intelligence (GenAI) and large language models (LLMs)" refers to any technology or application that can generate text, images, audio, videos, and other media based on a user-submitted prompt.

"Public AI tools" refers to any service not licensed/contracted by Penn/PSOM, while "approved tools" refers to those services specifically listed on Penn's registry (Section III).

III. POLICY and GUIDELINES

Permissions of Use:
- Students should not assume that the use of AI is acceptable in every instance of course work or patient care. Acceptable use involves school and system level guidance in addition to instructor-driven guidance.
- Unauthorized use of AI, GenAI, and LLM applications to create clinical documentation will be grounds for failing an assignment, course, or clerkship, and may initiate a professionalism review.
- Students must be aware of AI policies at the various curriculum-associated clinical sites. Most clinical sites adhere to the PSOM/Penn Medicine policies with exceptions including:
  - Philadelphia's Veteran's Affairs (VA) Hospital follows federal guidelines for use of AI, more information can be found on the VA website.
  - The Children's Hospital of Philadelphia (CHOP) follows two internal guidelines, accessible via the CHOP intranet.
    - Acceptable Uses and Governance of AI
    - Acceptable Use of Technology Resources
  - Other non-Penn affiliated hospitals and clinical practices. Please refer to each individual site's AI policy for guidance on GenAI tools that are acceptable for direct patient care.

Approved AI Tools at PSOM:
- Except when otherwise indicated, PSOM adopts Penn's centrally maintained registry of approved, contract-protected GenAI services as the authoritative list of tools permitted for use. Penn-approved AI tools have been vetted for Health Insurance Portability & Accountability Act (HIPAA) and Family Education Rights and Privacy Act (FERPA) compliance.
- The current list of approved tools is available at: PMACS AI Tools.
- Detailed descriptions of other approved GenAI tools can be found here: Information Systems and Computing Generative AI Tools and Resources.

Accountability of Use:
- Users of AI, GenAI, and LLMs must accept responsibility for generated content, especially if that content contains inaccuracies, misinformation, biases, or violations of privacy, professionalism, intellectual property, or codes of conduct, among other potential faults.

Disclosure of Use:
- If an AI tool is used by faculty or learners, it must be cited as a source, including the model or tool name. An explanation of how the AI tools were used should also be included (e.g., to generate ideas, turns of phrase, elements of text, long stretches of text, illustrations of key concepts, etc.).
- The use of an AI tool does not replace citations for primary and secondary sources.

Protection of Patient Privacy:

- Students are not permitted to share or input patient, student, or research participant information (including de-identified data) into publicly available AI tools due to the lack of HIPAA and/or FERPA restrictions on the use and dissemination of that data. This includes de-identified data that could be traced back to an individual.
- There are some publicly available tools that purport HIPAA compliance, but PSOM and the University of Pennsylvania Health System's (UPHS) stance is that protected health information (PHI) is still prohibited outside of explicitly approved AI tools for PSOM and UPHS, listed at [PMACS AI Tools](#).
- Patient, student, or research participant information may only be entered into GenAI applications that have been expressly recommended by UPHS, Penn Medicine, or PSOM as being secured and approved for this use, with a contract for such privacy concerns in place, listed at [PMACS AI Tools](#). Students should discuss the use of GenAI tools with any potentially sensitive data with supervising faculty.
- Users of GenAI assume responsibility of potential downstream implications that may violate existing policies or laws.

Protection of Intellectual Property and Sensitive Information:
- Students should review the [Penn Data Risk Classification](#) information before using GenAI.
- Students are permitted to input PSOM curricular material **only** into GenAI applications that have been expressly recommended by UPHS, Penn Medicine, or PSOM as being secured and approved for this use, with a contract for such privacy concerns in place, listed at [PMACS AI Tools](#).
- Students are not permitted to input PSOM curricular material into publicly available GenAI applications without the advance written approval of content authors and/or PSOM leadership. These guidelines are in place to protect intellectual property and copyright laws and will be enforced as described in the Violations of Conduct section below.
- Aligning with Penn policy, the use of AI must follow University data-risk categories found at: [Penn Data Risk Classification](#).
  - Low/Moderate-risk data may be used only within PSOM-licensed tools.
  - High-risk data are permitted only where the tool is explicitly cleared for that level.
  - Social Security numbers or payment card data should **never** be entered into any AI system.

Development of Clinical Skills:
- ***Strongly Discouraged*** *(unless specifically authorized by the course director):* Due to the potential for inaccuracies and the importance of developing foundational clinical skills, the use of GenAI for any function that could be considered clinical reasoning is strongly discouraged, including but not limited to tasks requiring clinical judgement, such as:
  - Building initial differential diagnoses
  - Generating clinical assessments and management plans
- ***Expressly Prohibited:***
  - GenAI should never be used to generate clinical notes and/or documentation in patient charts, including smart electronic health record (EHR) functions, except for the purpose of research or quality improvement.
  - Students may not create direct clinical notes using GenAI applications, outside of functions supported by the EHR.
  - The failure to adhere to these guidelines will be grounds for failing an assignment, course, or clerkship, and may initiate a professionalism review.

Use of AI in Coursework and Examinations:

- Use of GenAI applications is not permitted in written assignments, examinations, and any other academic exercise unless it is explicitly permitted by instructors or clinical faculty. This includes generation of history and physical exam documentation, as well as generation of differential diagnoses for submitted assignments. This will be enforced as described in the Violations of Conduct section below.
- Students are responsible for any inaccuracies or misinformation resulting from the use of GenAI tools. This includes verification of data outputs. To ensure reliability, students should always verify GenAI outputs with trusted and vetted sources such as existing society guidelines, core texts, and peer-reviewed articles.
- GenAI may be used as a study aid (e.g., to identify areas of growth, point towards acceptable guidelines, summarize publicly available content). However, students are responsible for confirming the accuracy of information that may be generated through this process, as it may include errors or be misleading.
- If a student is asked to use GenAI tools for an assignment, including for direct patient care, they must carefully follow the instructional guidance of the course faculty in the use of these tools.

Creation of Scholarly Work:
- Students and faculty must adhere to any relevant GenAI policies issued by academic journals, professional organizations or conferences when creating scholarly work.
- Students and faculty should disclose the use of AI tools in the development of manuscripts, presentations, posters, and abstracts.

Acceptable Use Cases of AI with PSOM-Approved Tools:
Acceptable use cases by students of PSOM-approved GenAI applications include:
- Summarizing curricular content, including creation of questions, flashcards, summaries, graphics, checklists, feedback generation, literature review, and outlines for learning.
- Creating patient-education text (without PHI) using verification and citation of sources.
- Clinical decision support when searching for evidence-based answers to clinical questions. For example, an acceptable prompt would be, "What are the guidelines and evidence of using steroids in a patient with a COPD exacerbation?"
- Students and faculty may use only PSOM approved and EHR-embedded tools for any sensitive content submissions.

Prohibited Uses of AI with Non-PSOM-Approved Tools:
Any use of non-PSOM-approved GenAI or LLM tools or applications with the following data is strictly prohibited:
- Entering PHI.
- Entering de-identified data that could be traced back to an individual.
- Entering moderate- or high-level institutional-specific, sensitive data as defined at: Penn Data Risk Classification.
- Entering patient or employee specific data.
- Entering non-public facing intellectual property.
- Using GenAI on any assessments, unless explicitly allowed by the course director.
- Direct-to-chart clinical documentation (H&P, progress notes, etc.) with non-PSOM-approved AI tools or outside EHR-supported features (e.g., copy-paste).
- Uploading proprietary slides, course materials, exam items, or copyrighted materials to non-PSOM-approved platforms.
- Unauthorized use of GenAI medical scribes.

Responsibilities of Instructors:
- Course syllabi should include a statement of acceptable use of AI in the course, and must include a hyperlink to this policy.
- Faculty, instructors, and course directors must clearly communicate expectations regarding the use of GenAI in verbal and/or written communication in their respective courses or course websites (e.g., CANVAS pages). Please see the Center for Education, Teaching, Learning & Innovation's (CETLI) website on [Generative AI & Your Teaching](#) for additional resources.
- When GenAI is approved, faculty should provide learners with clear parameters on what elements of the assignment can and cannot be produced with the assistance of AI tools (e.g., research and editing, but not generation of ideas). In addition, faculty should provide guidelines to learners for proper documentation, attribution, and validation of AI outputs.
- Faculty who use GenAI for the creation of teaching material must adhere to these same standards and must disclose to students when course materials have been created with the use of AI.
- Faculty must disclose to students when AI-detection software will be used in the course or if you used AI to generate assessments. Please see the [Statement on Guidance for the University of Pennsylvania Community on Use of Generative Artificial Intelligence](#).

Violations of Conduct:
- Students, faculty, and staff may report suspected misuse, privacy concerns, or suggested improvements. Reports made in good faith are protected from retaliation.
- Allegations of student breaches in professional behavior can be reported in a variety of ways:
  - Reports may be submitted confidentially online through the [Professionalism at PSOM Portal](#) by anyone with a PennKey, including students, housestaff, faculty, staff, and administration.
  - Reports may be submitted to [Safety Net](#).
  - Reports can be made to the Academic Programs Office administrators or any of the Associate and Assistant Deans, the Vice Dean for Undergraduate Medical Education (VD-UME), or to the Chief Operating Officer.
  - Any Course Director who determines that there is an immediate professionalism concern will report the issue directly to the Associate Dean for Student Affairs and Wellness.
  - Individual evaluators in courses or clerkships may submit an evaluation which documents a professionalism issue or concerns. This will alert the appropriate departmental administrator.

Ongoing Review:
Given the rapid evolution of available GenAI tools, this policy will be reviewed and updated as frequently as needed. Students and faculty are responsible for staying informed of any changes to this policy.

Category	Acceptable Use with PSOM-Approved GenAI Tools**	Unacceptable Use with Any GenAI Tool
Coursework & Study Aids	• Summarizing curricular content • Creating flashcards, outlines, graphics, checklists • Generating practice questions	• Using GenAI to complete assignments or exams, unless explicitly permitted • Uploading curricular content or exam items to public GenAI tools
Patient Care	• Use of GenAI may be permitted as a clinical decision support tool,	• Direct-to-chart documentation using non-approved GenAI tools

	depending on the course, as long as its outputs and sources are verified and disclosed to supervising faculty, if applicable. In contrast, use for clinical reasoning tasks such as building initial differential diagnoses and management plans is strongly discouraged, unless explicitly approved by the course director.	• Inputting PHI or de-identified data into non-Penn-approved AI tools • Using unauthorized AI scribes
Documentation & EHR Use	• Using EHR-supported features that are explicitly course approved	• Direct-to-chart documentation using non-approved GenAI tools • Creating clinical notes outside approved EHR tools • Copy-pasting AI-generated notes into charts without clinician review
Scholarly Work & Quality Improvement	• Using GenAI for formatting and literature review with proper citation • Following journal-specific AI disclosure policies	• Uploading patient databases or research data into non-Penn-approved AI tools • Uploading intellectual property, works in progress, or non-publicly available scholarly work into non-Penn-approved tools
Tool Access & Security	• Using Penn-approved ambient listening, clinical documentation, and clinical AI tools	• Using public GenAI tools for sensitive data that are not explicitly Penn-approved (e.g., wearable glasses) • Entering PSOM curricular content without permission
Faculty & Instructional Use	• Faculty-guided use of GenAI in specific assignments • Clear communication of expectations • Please see the CETLI website for additional resources and best practices on use of GenAI tools in teaching.	• Nondisclosure of use of AI for creation of content, assessments, or review of student submissions

Commented [KJ7]: is this consistent with not using it for clinical reasoning above. This language seems more lenient than what was above.

Commented [SK8R7]: i clarified the language. does this make better sense. earlier we say that it can be used for clinical decision support rather than clinical reasoning.

Commented [KJ9R7]: i am probably dense but i am not sure i know the distinction between a clinical decision support tool and clinical reasoning since I thought decision support tools can help with diagnostic and therapeutic clinical reasoning tasks

Commented [SK10R7]: i agree it is nuanced. I think what we are trying to say is that you can use AI tools but it shouldnt be doing all the thinking for you. This will also vary by course. the idea of a clinical question as outlined above "what are the guidlines for using steroids in COPD" is similar to what we allow now with tools like up to date. the difference is that we cant tell up to date to make our entire management plan without synthesizing the info. we are going to need course directors to be explicit in guidance as it will likely varying across the continuum

Commented [KJ11]: i notice on may rows of the table that the columns are not inverses of eachother. For example in this row - should the reader infer that uploading patient databases into Penn approved AI tools is acceptable? meaning the content in each column of a row are not parallel ideas/topics

Commented [SK12R11]: yes i think that is a correct inference. I think we would want students to have supervision in this case, faculty i think would be permitted if the tool has the correct level of security protection. If helpul I can go through and list the converse of some of these statements. The table may just be longer.

**(with human review, if for anything other than personal use)

IV. POLICY AUTHOR(S)

PSOM Artificial Intelligence Policy Committee
Contributors: Stacey Kassutto, Flint Wang, Nathaniel Srikureja, Daniel Lai, Zoe Barinaga, Suzana Tsao, Daniel DiPietro, Rosalyn Schorr, Vivian Lee, Charles Bae, Nadia Bennett

This policy was developed with the assistance of OpenAI's ChatGPT Edu and Microsoft CoPilot (September-October 2025), which provided examples and frameworks drawn from publicly available institutional AI policies.

V. REFERENCES

AAMC AI Policy Development Checklist for Medical Education

Academic Performance and Progression

VI. GOVERNING BODY

Undergraduate Medical Education Committee

VII. POLICY HISTORY

Date	Change
10/03/2025	Created
xx/xx/xx	Approved