



Provincial Health Services Authority

Documentation by Physician Trainees Policy

Summary of Changes

	NEW	Previous
BC Cancer		HIM 060-IV-60 - Documentation by Physician Trainees –last approved on May 16, 2013

Released:	29/Oct/2018	Next Review:	24/Jul/2021	
				Page 1 of 5

This material has been prepared solely for use at Provincial Health Services Authority (PHSA). PHSA accepts no responsibility for use of this material by any person or organization not associated with PHSA. A printed copy of this document may not reflect the current electronic version on the PHSA Intranet.

Documentation by Physician Trainees Policy

1. Introduction

1.1 Purpose

To provide a policy to guide physicians about the documentation done by trainees at BC Cancer.

1.2 Scope

The Medical Staff Professional Rules and Regulations will determine the specific policy requirements for documentation.

2. Policy

2.1. Documentation by trainees will be reviewed by the supervising medical staff.

2.2. General Considerations

- a) Documentation will be clear, brief and avoid duplication;
- b) New abnormal findings (clinical or tests) will be immediately brought to the attention of the patient's BCCA specialist/alternate and where appropriate, to the patient's private physician
- c) Copies of dictated chart notes are forwarded to the patient's private physicians after being reviewed and signed off by the mentor / supervisor of the trainee if appropriate

2.3. Inpatients

2.3.1 Admission Note

- a) A history and physical will be written on the inpatient chart on the date of admission and preferably within 24 hours;
- b) A diagnosis/assessment and a plan of investigation and treatment will be included
- c) The admission note will be countersigned by the attending physician

2.3.2 Interval Notes

The interval notes must be appended whenever there is a change of status or treatment, or at least daily.

2.3.3 Admission and Discharge Summary

a) Transfer Patients

Released:	29/Oct/2018	Next Review:	24/Jul/2021	
				Page 2 of 5
This material has been prepared solely for use at Provincial Health Services Authority (PHSA). PHSA accepts no responsibility for use of this material by any person or organization not associated with PHSA. A printed copy of this document may not reflect the current electronic version on the PHSA Intranet.				

Documentation by Physician Trainees Policy

An admission and discharge summary (or handwritten summary of pertinent data/current treatment) must accompany patients transferred to another facility. The Discharge Medication Reconciliation Report is part of the Admission and Discharge Summary.

b) All Patients

An admission and discharge summary will:

- Be dictated within 24 hours of discharge wherever possible;
- Include a succinct summary of the history, physical, investigation results/assessment and diagnoses, treatment and follow-up disposition.
- The Discharge Medication Reconciliation Report is part of the Admission and Discharge Summary.

c) Signature

The summary will be forwarded to the attending physician (or alternate) for review and signature

2.3.4 Report Signing/Initialling

- a) The Clinical Practitioner in Oncology (CPO) or Oncology Resident / Fellow (not rotating residents or MSI's) will be responsible for electronically signing reports of investigations that are requested during the relevant admission;
- b) The CPO's or fellow's or resident's electronic signature indicate responsibility for noting the results and taking any appropriate action
- c) The patient's attending physician will be notified regarding any new abnormalities

2.4 Outpatients

- a) Outpatient visits can be consultations, follow-up visits or on treatment visits;
- b) A succinct note will be dictated after discussion of the case with a BC Cancer medical staff who function as the trainee's supervisor / mentor.
- c) The dictated note will not repeat the previous history in detail but will form an assessment which includes the:
 - (i) diagnosis and status;
 - (ii) assessment and findings
 - (iii) prescribed treatment
 - (iv) follow-up disposition

Released:	29/Oct/2018	Next Review:	24/Jul/2021	
				Page 3 of 5

Documentation by Physician Trainees Policy

- (v) name of the doctor dictating the note
 - (vi) name of the medical staff with whom the case was discussed
-
- d) All dictation by rotating residents (below R3) and MSI's will be forwarded to the supervising medical staff for review and signature prior to distribution.
 - e) All consultation notes will be forwarded to the supervising medical staff for review and signature prior to distribution.

3. Responsibilities

The Trainee is responsible for adherence to the policy.

4. Compliance

All Trainees are required to comply with this policy.

5. Definitions

Trainees: Includes oncology trainees, rotating residents, residents accompanying consulting staff and medical student interns.

6. References

PHSA Medical Staff Rules

[H:\EVERYONE\MedicalStaff\Policy Reference Documents\MEDICAL STAFF RULES_PHSA_BD \(Feb 5.09\) .pdf](H:\EVERYONE\MedicalStaff\Policy Reference Documents\MEDICAL STAFF RULES_PHSA_BD (Feb 5.09) .pdf)

Released:	29/Oct/2018	Next Review:	24/Jul/2021	
				Page 4 of 5
This material has been prepared solely for use at Provincial Health Services Authority (PHSA). PHSA accepts no responsibility for use of this material by any person or organization not associated with PHSA. A printed copy of this document may not reflect the current electronic version on the PHSA Intranet.				

Documentation by Physician Trainees Policy

****Last page of document****

First Issued:	Last revised May 16 2013		
Approving Body:	Medical Advisory Committee		
Final Sign Off:	Name	Title	Date Signed
	Dr. Lorna Weir	Chair, MAC	18-10-2018
Developed By:	Name	Dept.	HO
	Clinical Records Committee		
Owner(s):	Clinical Records Committee and Medical Advisory Committee		
Posted Date:	29-10-2018		
Version:			
Revision:	Name of Reviser	Description	Date
	Clinical Records Committee		24-Jul-2018