

Orientation

For New Residents



Regional Medical Center

Welcome

Thank you for making The MED your choice to further your graduate medical education.

We ask that you review this Resident Orientation and complete the required tasks prior to attending the University of Tennessee Health Science Center's on-site orientation.



Regional Medical Center

Message from the CEO

We are delighted that you have chosen The MED as a clinical training site. We hope that your experience at The MED will be a valuable learning opportunity that will enhance your career!

Regional Medical Center at Memphis is the oldest hospital in Tennessee and is committed to providing quality healthcare to all in this community. We enjoy a rich and historic 180-year plus tradition of providing excellent service and highly specialized care to the citizens of Shelby County and the entire Mid-South. It is our commitment to continue this tradition.



I am deeply honored and proud to lead this great institution into the next chapter in its history. It is a privilege to foster and lead a team of healthcare professionals dedicated to excellence and committed to quality. Through the actions of and communications with our employees, you will experience a team of highly trained healthcare professionals delivering compassionate and quality care to you and your family. You will see a healthcare organization that achieves growth and sustainability by focusing on quality improvement and accountability. You will see a healthy and sustained Regional Medical Center.

Sincerely,
Reginald W. Coopwood, MD
President and CEO



Regional Medical Center

Health Information Management (HIM)



Regional Medical Center

Electronic Health Record Systems

Siemens Soarian Clinicals – Clinical Documentation System

Laserfische – Medical Record and Document Repository

Webmedex – Dictation

Meditech PCI – Dictation eSign & Historical Reports

SIS – Surgical Information System

Medhost – Emergency Department System

GE Centricity Parinatal – NICU, Nursery, and L&D System
(also commonly known as QS or CPN)



Regional Medical Center

Health Information Management (HIM)

The HIM Department is open **6am – 10:30pm (Monday-Friday), 7am – 5:30pm (Saturday and Sunday).**

Medical records are available for review via Laserfische.

Dictation is performed via Webmedex and may be eSigned in Meditech PCI or Physician Portal.

DO NOT TAKE records from the hospital unit for any reason.



Regional Medical Center

Health Information Management (HIM)

DISCHARGE SUMMARIES must be dictated for all patients, (except uncomplicated deliveries, ambulatory surgery patients, and well babies), including all deaths and patients who leave AMA.

Uncomplicated deliveries must have a thorough discharge note completed in QS which may be used in lieu of a discharge summary.



Health Information Management (HIM)

Residents are normally assigned the responsibility of dictating the discharge summary with a co-signature required by the attending.

ALWAYS STATE the discharging ATTENDING'S NAME on every dictation!!!

If you admit a patient to a 23 hour observation status, a discharge summary is needed as well!



Health Information Management (HIM)

OPERATIVE REPORTS must be dictated immediately following the procedure.

Any attending physician with un-dictated op reports 5 working days following the day of the operation/procedure will be reported to the department chair.

- Residents are normally assigned the responsibility of dictating the operative report with a co-signature required by the attending.



Health Information Management (HIM)

TELEPHONE ORDERS must be authenticated, dated, and timed by the physician within 14 days of time given.

- Nursing units will assist by flagging orders on the units.

Telephone orders can be authenticated by another physician responsible for the care.

VERBAL ORDERS may only be given in emergency situations.



Health Information Management (HIM)

AUTOPSY – For unexpected or unexplained deaths not subject to autopsy by the Medical Examiner (ME) or if the autopsy was waived by the ME, an autopsy should be requested and consent obtained by the treating physician from the next-of-kin or the legal custodian/guardian of the deceased.

Please refer to the “AUTOPSY” policy and procedure on The MED’s intranet for details.



Health Information Management (HIM)

ADMITTING ORDERS **must be written** (stating what unit the patient is to be admitted to and the attending).

IF a patient is transferred – another order must be written stating what service and/or unit the patient was transferred to.



Health Information Management (HIM)

To expedite completion of your medical records post-discharge:

- Please call **545-8396 or 545-7459** **PRIOR** to coming to our department so that we can verify the records that are assigned to you.
- The expectation is **Physicians** know what needs to be dictated whether summary/op report and **HIM** is the support system to make sure the hospital meets all state and federal documentation requirements.



Regional Medical Center

Health Information Management (HIM)

HIM contacts residents beginning at **23 days** to complete records for their attending.

Both the resident and the attending are contacted when incomplete charts are at **27 days**.

The closer the chart gets to **30 days** the more intense our attempts become to contact the physician to prevent suspension.

A suspension letter is submitted to the CEO for signature if records are not complete at 30 days.



Health Information Management (HIM)

All dictated reports must be electronically signed (e-sign). These reports are signed via Meditech PCI. In order to obtain access to Meditech and subsequently sign reports, you must first come to HIM between the hours of 8:00am to 4:30pm to obtain an e-sign PIN.

Any questions concerning medical records (HIM):

Before 4:30pm:

Incomplete Chart Area (8am-4:30pm) 545-8396 or 545-7549

After 4:30pm:

(901) 545-7035



Regional Medical Center

The Complete Chart Consist of: (if applicable)

Admission documents (which can be found in
Laserfiche/Meditech)

Any Clinic Encounters (if any – can be found in Laserfiche)

Ancillary Reports – (can be found in
Meditech/Laserfiche/Soarian)

Death packet (if any – can be found in Laserfiche)

Transfusion Record (if any – can be found in
Laserfiche/Meditech/Soarian)

Report of Consults (if any – can be found in Laserfiche)



The Complete Chart Consist of: (if applicable)

EKG –if any – can be found in Laserfiche

Procedure Documents – if any – can be found in
Laserfiche/Meditech/Soarian/SIS

ER Documents – if any – can be found in
Laserfiche/Soarian/Meditech/Medhost

H&P – can be found in Laserfiche/Medhost
Soarian/Meditech

Progress Notes – can be found in Laserfiche

Medication Reconciliation Form – can be found in
Laserfiche)

Physician Orders – can be found in Laserfiche



The Complete Chart Consist of: (if applicable)

Medication Administration Record – can be found in Laserfiche/Soarian – for Rehab

Nursing Documentation – includes vitals, care plans, flow sheets, ventilator records, clinical notes – can be found in Meditech/Soarian

Telemetry Records – if any – can be found in Laserfiche

Resuscitation Record – if any - can be found in Laserfiche

OB Charts – can be found in QS/Laserfiche

Well Baby Charts – can be found in QS/Laserfiche



The Complete Chart Consist of: (if applicable)

Sick Baby Charts – can be found in Laserfiche/QS

Dictated Reports – can be found in Meditech or Laserfiche

Wound Care Documentation – can be found in
Laserfiche/Wound Expert

Outpatient Rehab Documentation – can be found in
Laserfiche



Emergency Medical Treatment and Labor Act (EMTALA) Essentials



Regional Medical Center

When Does EMTALA Apply?

- Patient request treatment to one of our 4 dedicated emergency areas:
 - Medicine ED (including Police Holding)
 - Trauma
 - L&D Evaluation
 - Burn
- Patient presents with an emergency to the MED Outpatient Center
- Patient is in ambulance on THE MED's property
- Patient is on MED property and requests, or appears to need, treatment.



Patient Assessment Comes First!!

An appropriate medical screening exam (MSE) must be conducted anytime a patient, including children, requests treatment, no matter the mode of the patient's arrival (i.e. ambulatory, ambulance, etc.) or if THE MED is on diversion.

IF THE PATIENT IS ON MED PROPERTY AND REQUESTS (OR APPEARS TO NEED) TREATMENT, A MSE MUST BE PERFORMED BEFORE HE/SHE LEAVES!



Medical Screening Examination (MSE)

A MSE is a complaint-focused assessment of sufficient scope to determine whether emergency treatment is required or if the patient is stable for transfer.

Request for MSE or treatment can be made by anyone, family member, squad, police, or bystander.



Emergency Medical Condition (EMC)

A medical condition manifesting itself by acute symptoms of sufficient severity including:

- Severe pain
- Psychiatric disturbances and/or
- Symptoms of substance abuse
- Emergent condition threatens life and limb
- Emergent medical condition is defined by rules and regulations not medical practice

The absence of immediate medical attention could reasonably be expected to result in placing the health of the individual (or unborn child) in:

- Serious jeopardy,
- Serious impairment to bodily functions, or
- Serious dysfunction of any bodily organ or part, even the smallest part.



Medical Screening Examination (MSE)

A MSE must be conducted and documented by Qualified Medical Professional (QMP as defined in MED Bylaws) and consistent with state licensure laws (usually Physician, PA, or NP).

MSE must be adequate and appropriate (will vary based on the patient's condition, complaints, and history) and includes the testing and services needed to decide if the patient's complaint is on Emergency Medical Condition (EMC) and the same screening exam as all others presenting to the ED (same standard of care.)

EMC must be excluded as part of the MSE.



Emergency Medical Condition: OB

With respect to a pregnant woman having contractions, EMC means:

- There is not adequate time for safe transfer to another hospital before delivery; or
- Transfer may pose a threat to the health or safety of the woman or unborn child.

The presence of active labor does not determine the EMC.

An EMC may be independent of active labor.



Leaving AMA

If any MED staff member is aware of a patient leaving a MED emergency area prior to being discharged, it is that staff member's responsibility to ask the patient to wait until he or she has been seen by a physician (or QMP).

All staff should attempt to:

- Have a physician (or QMP) explain the risks of leaving The MED prior to a MSE or treatment; and
- Ask the patient to sign a Leaving AMA Form.
- If the patient refuses to sign, document the refusal on the form.



Left Without Being Seen (LWBS)

If a patient leaves the ED without notifying a MED staff member, the patient should be called three times 15 minutes apart and document all three attempts in the medical record.



Obtaining a MED ID Badges

A MED ID badge may be obtained once you have completed your online MED orientation.

ID badges are made at MED Security

- 1st floor Chandler Building (located inside of The MED)
- 9:00 am – 11:00 am and 1:00 pm – 3:00 pm.
- MED Security 901-545-7696



Obtaining MED Parking

Only resident who are rotating at The MED will be allowed to park, free of charge, in The MED Parking Garage at the corner of Jefferson & Pauline.

You must first obtain your MED ID badge.

During the month(s) that you rotate to The MED, your ID badges will be keyed for parking garage access.

The badge isn't needed to enter the garage, but you must swipe your badge to exit the garage.



Regional Medical Center

MED Meal Tickets

When residents are on-call at The MED; they will receive MED meal tickets.

Monthly each department requests the number of meal tickets their residents will need.

The meal tickets for the upcoming month will be available in your department 2-3 days prior to the end of the previous month.



Physician Liaison

If you have any questions, issues, or concerns, please contact the Graduate Medical Education Office for The MED:

Annie Lewis

Quality Department

2nd Floor Med Outpatient Center (MedPlex), Room 2H04-F

901-545-7825

alewis@the-med.org



Regional Medical Center

Proof of Completion

To finish the New Resident Orientation, you must pass a short quiz, after which you can sign up for computer access.

[Click Here for the New Resident Orientation Quiz](#)

Upon successful completion, you'll automatically be directed to Access Request, but you can go directly there yourself by visiting <https://accessrequest.the-med.org>.

Please note that your online request for access will NOT be approved until you have completed the quiz above.



Regional Medical Center