



DEPARTMENT OF THE ARMY
HEADQUARTERS, WESTERN REGIONAL MEDICAL COMMAND
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OFFICE OF THE CHIEF, US ARMY MEDICAL CORPS

DASG-PSZ-MG

17 July 2013

MEMORANDUM FOR MTF DEPUTY COMMANDERS FOR CLINICAL SERVICES, MTF DIRECTORS OF MEDICAL EDUCATION, GRADUATE MEDICAL EDUCATION OFFICES

SUBJECT: Standards for Student Shadow Experiences at Army MTFs

1. "It is never too early to recruit" is a relevant adage for the Army Medical Corps. In that the impressive resources at every Training MTF provide opportunities for recruitment of future AMEDD physicians and health care providers, each MTF has the option of offering individuals who wish to participate in hospital activities an observational experience. Such activities also promote positive community relations with external educational institutions, and are in the spirit of TSG's strategic initiative of enhancing diplomacy.

2. The institution's GME Office is in the best position to understand and coordinate recruiting experiences, although there is significant variation in the ability of each MTF to support such activities. Specific funding for these activities is not available; however, the value of the potential benefit of such an investment should be considered.

3. The following guidance is intended to provide standards at each site to ensure patient safety and consistency across the AMEDD in locations where these experiences occur.

a. Eligible "students" (all observers must be in an actual "student" status at a school or institution)

(1) College students

(2) High-school students

(3) Other students interested in allied health professions

b. Responsibility

(1) Approval for an observer opportunity is at the discretion of the Department Chiefs and/or Program Directors, with concurrence from the GME Office

(2) All student observers must in-process and be documented through the GME Office for accountability and compliance with standards

c. Process

(1) Each MTF that is able to accommodate students for observational or shadow experiences should establish procedures regarding oversight, sponsorship, availability and the means by which students schedule and coordinate experiences

(2) Students should contact the individual MTFs for details on available experiences and scheduling

d. Defined "Rules of Engagement"

(1) Student eligibility requirements

(a) HIPAA training (must be completed and documented)

(b) Proof of influenza vaccination within past 12 months

(c) Proof of TB testing in the previous 12 months

(d) Proof of current health insurance

(2) Students must be directly supervised by a hospital staff member at all times

(3) Students must wear a badge identifying them as a student observer or shadow

(4) Students may not see or interact with patients independently

(5) Patients must be asked permission to allow a student to observe any portion of their care, whether interview, examination, or other testing

(6) Students will not provide medical care, which includes independently taking a medical history, examining a patient (including in OR), providing medical advice to a patient, or assisting in any surgery or other procedures

(7) Students may not write orders for patients or make verbal orders for patients

(8) Students will not have access to patient medical records, either hard copy or electronic

(9) Students will not have access to restricted or secure areas of the hospital

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(10) Students in high school or college will not wear a white coat or other clothing that would potentially identify them as a hospital staff member, medical student, resident, or staff physician

(11) Students must dress professionally

(12) Students will follow all applicable MTF policies

(13) Students must be US citizens

(14) Students will not receive any financial support from the MTF

(15) Students should be aware that they must provide for their own housing, parking, and transportation; MTFs are under no obligation to provide such support in order for them to participate in the program

e. Other considerations

(1) MTFs should maintain a record of students who have participated in the shadow experiences

(2) MTFs may provide documentation or letters of recommendation for students based on their performance during these experiences

(3) MTFs should offer shadow activities based on their own resources and at the discretion of the Commander; Deputy Commander for Clinical Services; Director, Medical Education; and Department Chief, and may dictate the duration of these observerships.

4. POC for this memo is COL Cathy Nace, mary.c.nace.mil@mail.mil; (703) 681-8256.



RICHARD W. THOMAS
Major General, USA
Chief, Medical Corps



**DEPARTMENT OF THE ARMY
WOMACK ARMY MEDICAL CENTER
FORT BRAGG, NORTH CAROLINA 28310**

REPLY TO
ATTENTION OF

**MEMORANDUM OF UNDERSTANDING
BETWEEN
WOMACK ARMY MEDICAL CENTER
AND
MEDICAL/ DENTAL/ HEALTHCARE STUDENT**

SUBJECT: Student Visitor Responsibilities for Maintaining Confidentiality of Protected Health Information

1. I am a medical /dental / healthcare student and I am considering or pursuing a medical, dental, or healthcare career. I am visiting this military treatment facility to gain information about a medical, dental, or a healthcare career and the possibility that I may become a Health Professions Scholarship Program candidate or healthcare professional.
2. During my visit, I may come in contact with patient protected health information. I understand that protected health information is protected by Public Law 104-191, known as the Health Insurance Portability and Accountability Act, and 45 CFR Parts 160 and 164. With the exception of treatment, payment, and healthcare operations, protected health information can only be disclosed to a third party with the patient's consent and other limited circumstances. As a student, I understand I am allowed to appropriately use and disclose protected health information under the provisions for healthcare operations.
3. I understand a patient's protected health information is personal and private and I agree that I will not further disclose this information to a third party unless I exclude individually identifiable information, such as the patient's name, address and other personally identifying information.
4. I understand this memorandum of understanding will be kept on file at this military treatment facility for six years from the date below.
5. I will also complete other in processing paperwork as required by the Womack Army Medical Center- GME Office.
6. I am required to complete the online HIPAA training @ <https://mhslearn.csd.disa.mil/ilearn/en/learner/mhs/portal/mhsstaff.jsp> and present the certificate to the GME office.

TANYA SINCLAIR
GME COORDINATOR

(Date)

STUDENT

(Date)



**DEPARTMENT OF THE ARMY
WOMACK ARMY MEDICAL CENTER
FORT BRAGG, NORTH CAROLINA 28310**

REPLY TO
ATTENTION OF

To Whom It May Concern:

The following HealthCare Student Observer has _____ hrs of observation time in the

_____ Clinical Service Area at:

Womack Army Medical Center

Joel Health Clinic

Clark Health Clinic

Robinson Health Clinic

Pope Health Clinic

CLINICAL PRECEPTOR

STUDENT

(Date)

(Date)