

**AE 003 LCME 9.3 Clinical Supervision of Medical Students Policy**

**Policy Type:** Academic  
**Responsible Office:** Academic Affairs & Education  
**Responsible for Oversight:** Curriculum Oversight Committee (COC)  
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**Training Required:** No  
**LCME Required:** Yes

**Approved by:**



Alison Netski, MD, Interim Dean

**Date:** May 16, 2025

**Definitions**

**Direct supervision:** The supervisor is physically present in the same room with the student and the patient.

**Indirect supervision:** The supervisor is physically within the hospital or the site of patient care, and is immediately available to provide direct supervision. The supervisor must provide the student with a method by which he/she may be contacted to provide immediate director supervision, such as a phone number or pager number.

**Resident:** A resident is a medical school graduate and physician in training who is taking part in a graduate medical education ("GME") program accredited by the ACGME.

**Fellow:** A fellow is a physician in training in an advanced graduate medical education program beyond a core residency program.

**Faculty:** A physician or health professional who has received an academic faculty or adjunct faculty appointment through the Office of Faculty Affairs.

**Scope of Practice:** An area of expertise in patient care for a physician or health professional that is documented by licensing, board certification, or privileges in a healthcare facility.

**Statement of Purpose**

This policy is intended to ensure compliance with LCME Standard 9.3: A medical school ensures that medical students in clinical learning situations involving patient care are appropriately supervised at all times in order to ensure patient and student safety, that the level of responsibility delegated to the student is appropriate to the student's level of training, and that the activities supervised are within the scope of practice of the supervising health professional.

**Entities Affected by This Policy**

This policy applies to all Kirk Kerkorian School of Medicine ("SOM") medical students, visiting medical students who are participating in UNLV-hosted externships, and all SOM and non-SOM residents, fellows and faculty who teach SOM medical students in clinical settings.

## Required Acknowledgement

This policy is posted in all required clerkship syllabi, the Student Handbook, the Electives Catalog, reviewed during the clinical preparation course, and accessible online for student and faculty reference in the school's curriculum management system, MedHub.

## Policy

While engaged in clinical rotations or clinical activities, medical students are incorporated into the medical team as integral team members, permitted to participate in team care of patients, and expected to carry out patient care responsibilities based on their level of training, expertise, and experience. Effective supervision should foster responsibility and independence as students' progress through their training.

In accordance with LCME standard 9.3, all medical students in clinical learning situations involving patient care will be appropriately supervised at all times by a faculty member, fellow or resident to ensure patient and student safety. The level of responsibility delegated to the student must be appropriate to the student's level of training, and the activities supervised must be within the scope of practice of the supervising health professional.

SOM works with its teaching sites to maintain appropriate levels of supervision to ensure safety of patients and students. This supervision agreement is part of the clinical affiliation agreements of all clinical teaching sites where students are assigned.

**The following individuals are permitted to supervise medical students in clinical learning situations:**

- Faculty
- Residents and fellows approved by faculty physicians

The faculty supervisor is responsible for determining the level of supervision that must be accorded to a medical student. The faculty supervisor may delegate supervision of a medical student to an appropriately trained fellow or resident if deemed appropriate. The level of supervision accorded to the medical student is based on several factors:

- Objectives and required clinical experiences for the course/clerkship
- Level of training of the student and the student's experience with the clinical activity/setting
- Supervisor's familiarity with the student's abilities
- Acuity of the patient and complexity of the clinical activity.

Medical students must be under **Direct Supervision** when:

- Assisting or performing invasive procedures;
- Obtaining informed consent;
- Performing intimate exams. Intimate exams include, but are not limited to, genitourinary, rectal, and breast exams.

At the discretion of the clinical supervisor, medical students may perform the following under **Indirect Supervision**:

- Obtaining patient histories and performing routine physical exams;
- Performing simple procedures, such as:
  - Venipunctures (for blood draw or to place a peripheral iv catheter)
  - Placement of ECG leads (for monitoring or to obtain ECG tracings)
  - Suturing of simple lacerations of the extremities
  - Removal of staples and sutures (with or without placement of steri-strips)

- Apply or change superficial wound dressings
- Swab for culture (e.g., throat, skin, wounds)

The faculty supervisor is always responsible for student documentation in medical records, including history and physical, progress notes, and procedure notes. Student documentations must be immediately co-signed by physicians, either residents or attendings, and according to the bylaws of each facility.

Clinical supervisors are expected to notify the clerkship or course director immediately if serious academic or professional gaps in medical student performance exist that may jeopardize student and/or patient safety, or educational goals.

### **Responsibilities of Clerkship/Course Directors**

- Clerkship/course directors are responsible for assigning students to faculty supervisors at designated clinical sites.
- Clerkship/course directors are responsible for communicating policies and procedures related to supervision to faculty, non-faculty instructors, residents/fellows, and students, and for monitoring compliance.
- Clerkship/course directors are responsible to address any violations of this policy.
- Clerkship/course directors are responsible for communicating procedures through which students can confidentially report concerns regarding supervision or violations of this policy. Procedures may include, but are not limited to:
  - Reporting in the learning management system (MedHub)
  - Direct reporting to a clerkship or course director or coordinator
  - Documenting concerns in course or clerkship evaluations
  - Direct reporting to the dean for student affairs and career services

### **Responsibility of Medical Students**

- Medical students may not provide care or perform procedures in an unsupervised fashion. Providing care in an unsupervised fashion represents a breach of professionalism and will be addressed by the Student Progress Committee.
- Medical students must report a violation of this supervision policy to the clerkship/course director.

### **Monitoring**

Students report compliance of this policy during the midterm formative feedback and in the final clerkship/course evaluation. The director of educational outcomes and assessment is responsible for monitoring compliance on an ongoing basis.

## **Review of Policy**

This policy is reviewed by the Curriculum Oversight Committee (“COC”) every three (3) years per the previous date of approval.

## **Related Documents**

Clerkship Syllabi  
Student Handbook  
Electives Catalog  
MedHub

## Contacts

Academic Affairs & Education  
[somcurriculum@medicine.unlv.edu](mailto:somcurriculum@medicine.unlv.edu)

Student Affairs & Career Services  
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