

SECTION SEVEN: INSTITUTIONAL POLICIES RELATIVE TO GME PROGRAMS

POLICY NO: 7.4

SUBJECT: HOUSE STAFF COMPLETION OF MEDICAL RECORDS

I. PURPOSE

- A. To ensure prompt and accurate completion of medical records
- B. To ensure timely payment to the hospital of amount due as the result of services rendered.
- C. To define terms and outline responsibilities and procedures involved to ensure compliance with this policy.

II. SCOPE

It shall be the policy of Saint Peter's University Hospital that house staff failing to complete assigned patient medical records within 30 days of a patient discharge will be suspended unless there is a valid reason (i.e. the resident is ill) why completion is delayed.

III. ADDITIONAL DEFINITIONS

- D. Delinquent chart: A chart will be considered delinquent and suspension of the resident physician enforced if the chart is not completed within 30 days of the date of patient discharge. A chart will be considered delinquent when a dictated summary or report has not been signed within 30 days of discharge.
- E. Temporary suspension:
 - 1. Failure to complete the medical record according to the guidelines established should result in suspension of the resident from all clinical activities other than night and weekend call, just as failure on the part of an attending physician results in suspension of admitting privileges. At the time that residents are suspended, they will lose all academic credit and may, if suspended frequently enough, be unable to complete the requirements for academic standing. When a resident has rotated from one service to another at the same or a different hospital and is suspended for delinquency, the same suspension will apply. Saint Peter's University Hospital will recognize suspension invoked by all hospitals affiliated with SPUH and will request/expect corresponding reciprocity from the Department Chairmen and the program directors at all hospitals affiliated with SPUH. Though this may be viewed as disruptive to one institution when the infraction occurred at another, cooperation is essential between affiliated programs.
 - 2. Suspension for incomplete records can be removed only upon notification from the Health Information Management Manager/designee that the charts in question have been completed.
 - 3. Relief of suspension shall be by verbal and/or written verification by the Health Information Management Manager/designee to the appropriate Department Chair/Residency Program Director.
 - 4. Suspended residents who persist in evasion of the spirit of these rules and regulations will be in jeopardy of due process and suspension at

the instigation of Chairmen of Departments and/or the President of the Medical-Dental Staff, and/or the President of the Hospital.

II. RESPONSIBILITIES

A. Health Information Management Manager

1. One week prior to suspension, residents with delinquent charts (charts more than 30 days since discharge) will be sent warning notices.
2. If the charts remain delinquent on the Monday of the week the resident is to be suspended, a suspension letter will be sent to the delinquent resident.
3. The delinquent record memorandum will be prepared on Monday of suspension week.
4. The Health Information Management Manager/designee will review the memorandum and remove the names of any residents who have completed their delinquent charts.
5. The signed memorandum will be sent via Federal Express to affiliated hospitals, if applicable. (Suspension is effective on Wednesday at noon.)
6. Any resident who is unable to complete his/her delinquent records due to illness, vacation, etc., should inform the Manager of the Health Information Management Department, the Department Chairman, and/or the Residency Program Director.
7. The distribution list for the resident suspension memorandum is as outlined on the final page of the memorandum.

Reviewed:7/2007