

## Emergency Medicine Clerkship Supervision Policy

We follow the School of Medicine Supervision policy  
(<http://medicine.llu.edu/sites/medicine.llu.edu/files/docs/supervision.pdf>).

Procedure	Level of Supervision	Staff/Resident/Faculty	Comments
<b>Low Risk</b>			
Foley	Direct supervision	*Nursing staff	
Peripheral IV	Direct supervision	*Nursing staff	
Blood draw	Direct supervision	*Nursing staff	
Nasogastric tube	Direct supervision	*Nursing staff	
Perform EKG	Direct supervision	*Nursing staff	
Fracture splinting	Direct supervision	*Nursing staff	
<b>Moderate Risk</b>			
Simple laceration	Direct supervision	Resident/faculty	*Discretion of resident or faculty
Lumbar puncture	Direct supervision	Resident/faculty	
Arterial blood gas	Direct supervision	Resident/faculty/nursing staff	
Ultrasound (FAST or limited bedside)	Direct supervision	Resident/Faculty	
<b>High Risk</b>			
Pelvic, Rectal, and breast examinations	Direct supervision	Resident/faculty	Must have chaperone present
Complex laceration	Direct supervision	Resident/faculty	
Arthrocentesis	Direct supervision	Resident/faculty	
Paracentesis	Direct supervision	Resident/faculty	
Thoracentesis	Direct supervision	Resident/faculty	
Intubation	Direct supervision	Resident/Faculty	
Central Venous Access	Direct supervision	Resident/Faculty	
Arterial line	Direct supervision	Resident/Faculty	
Chest Compressions	Direct supervision	Resident/Faculty	
<b>Patient Triage Assessment</b>			
Patient Triage Assessment—RED	Direct supervision	Resident/Faculty	
Patient Triage Assessment—ORANGE	Direct supervision	Resident/Faculty	*Discretion of resident or faculty
Patient Triage Assessment—YELLOW	Direct supervision	Resident/Faculty	*Discretion of resident or faculty

Patient Triage Assessment— GREEN or BLUE	Direct supervision	Resident/Faculty	*Discretion of resident or faculty
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\*All procedure/patient care (pediatric and adult) supervision is at the **teaching faculty member's discretion** based on clinical task and status of each patient, and be commensurate with each student's level of training, education and clinical experience. Delegating supervision to non-physician care providers is determined after ensuring the non-physician providers are appropriately credentialed and working within the scope of their practice.