



Course Syllabus

Course #: HIT 2930 Course Name: Clinical Practicum II

Division: Business Technologies

Class Days:

Class Time:

Location:

Credit Hours: 2

Contact Hours: 0

Lab Hours: 14

Lecture Hours: 1

Instructor: John Richey

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Office Hours:

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Full-time Contact Person: Mary Kay Blair

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Course Description:

Supervised practicum designed to allow student to apply technical knowledge and skills learned in the classroom to procedures performed in the Health Information Management department. Assignments will be made to various types of health care facilities to gain exposure to health information practices.

Prerequisite(s): HIT 2450 BIO 1220. Other required hours: Practicum-14 hours per week at the Healthcare Facility; seminar-1 hour per week on campus.

Required Texts, Supplies and Equipment:

Transportation and associated expenses to and from the site is the student's responsibility. The student must also provide his/her own meals and must adhere to the proper dress code for the facility.

I. PERFORMANCE OBJECTIVES:

Upon successful completion of HIM-2930 Practicum II, the student should be able to:

- A. Obtain selected factual information pertaining to ownership, organization, services, facilities and patient population of the health care facility; the organization of the medical staff, and the organization and functions of the Health Information Management (HIM)/Medical Record Department (MRD).
- B. Assign or verify the patient/medical record number for patients upon admission in accordance with department policy and procedures.
- C. Verify patient names in the MPI to their patient/medical record number assignment (checking for duplicate numbers) and correct any duplicate numbers found in accordance with department policy and procedures.
- D. Compare patient/medical record number assignment, as indicated in the MPI, to the patient's folder in permanent file correcting any discrepancies noted (e.g. removing wrong information found in the folder, verifying correct location of the folder, etc.).

- E. Assemble records of discharged inpatients according to department procedure.
- F. Analyze records of discharged inpatients for quantitative deficiencies according to department policies and procedures.
- G. Retrieve patient records from the various storage areas/media used, according to department policy and procedure.
- H. File patient records and "loose reports" in accordance with department policy and procedures.
- I. Using health records, accurately code all diagnoses and procedures relevant to ER reports, outpatient records and inpatient records, representing varied diagnoses/procedures, using ICD-9-CM.
- J. Using the appropriate procedure manual, accurately complete five discharge abstracts (or equivalent task) representing varied services, exclusive of diagnostic and procedure codes.
- K. Describe the policies and procedures for each of the following functions
 - 1. Patient/record identification system
 - 2. Record assembly, analysis and incomplete record control
 - 3. Storage and retrieval system
 - 4. Coding, abstracting and indexing
 - 5. Processing for prospective payment by DRG
 - 6. Statistics
 - 7. Forms control
- L. Describe the major functions and activities of the following individuals or departments with special attention to their relationships to the HIM/MRD
 - 1. Admitting Office
 - 2. Patient Accounting
 - 3. Outpatient Registration
 - 4. Unit manager/ward clerk
 - 5. Risk Management/Utilization Review
- M. Communicate effectively in written form; specifically, this includes use of vocabulary appropriate to the topic, clarity of presentation, correct grammar, punctuation and spelling.
- N. Demonstrate professional behavior consistent with the environment of the affiliating institution; specifically, this includes
 - 1. Compliance with all applicable policies, procedures or rules of the HIM/MRD and health care facility, the ethical principles of the HIM profession, and the student code of conduct of the academic institution and/or program
 - 2. Adherence to the specified schedule with regard to start and stop time, lunch and break periods, and promptness in keeping appointments
 - 3. A cooperative attitude and active participation in all assigned tasks and activities
 - 4. Courtesy and tact in relations with all individuals in a business-like, professional appearance and demeanor
 - 5. Thorough organization and preparation for each assignment, meeting, or interview
 - 6. Mature behavior and interpersonal communication appropriate to a professional health information manager

PLAN OF WORK/TOPICAL OUTLINE:

3-28-06	<p style="text-align: center;">Orientation to course</p> <p>A. Orientation to medical record department and hospital</p> <ol style="list-style-type: none"> 1. Obtaining selected information pertaining to <ol style="list-style-type: none"> a. ownership b. organization c. services d. facilities e. patient population of health facility 2. Organization of the medical staff 3. Organization /functions of the HIM/MRD <p>B. Health record processing: description of policies and procedures for</p> <ol style="list-style-type: none"> 1. Patient/record identification system 2. Record assembly, analysis, and incomplete record control 3. Storage and retrieval system 4. Release of information 5. Coding, abstracting, and indexing 6. Processing for prospective payment by DRG 7. Statistics 8. Forms control <p>_____ Orientation form and Activity Log Sheet #1 is due (10 points)</p> <p>C. Patient/record identification system</p> <ol style="list-style-type: none"> 1. Assigning and verifying the patient/medical record number upon admission in accordance with department policy and procedures 2. Verifying patient names in the MPI to their patient/medical record number assignment <ol style="list-style-type: none"> a. checking for duplicate numbers b. correcting duplicate numbers found 3. Accurately comparing patient/medical record number assignments <ol style="list-style-type: none"> a. indicated in the MPI b. comparing to the patient's folder in permanent file c. correcting any discrepancies noted <p>_____ Patient Admission Process report and Activity Log Sheet #2 is due</p>
	<p>D. Retrieval of health records: accurate retrieval of health records from various storage areas/media used</p> <p>E. Storage of health records: accurate filing of health records and "loose reports"</p> <p>_____ Filing and Retrieval form is due</p>
	<p>F. Assembly of the health record: accurate assembly of health records of discharged inpatients according to departmental procedure</p> <p>G. Quantitative analysis: analyzing health records of discharged inpatients for quantitative deficiencies according to</p> <p>_____ Assembly and Analysis Sheet and Activity Log Sheet #3 is due</p>
	<p>H. Incomplete Record Control: rechecking records for completions and using chart locator and automated chart tracking system.</p> <p>_____ Incomplete Record Control report and Activity Log Sheet #4 is due</p>
	<p>I. Release of Information: HIPAA-related policies and procedures for requests for information and its subsequent release.</p> <p>_____ Release of Information report and form and Activity Log Sheet #5 is due</p>

	<p>J. ICD-9-CM coding</p> <ol style="list-style-type: none"> 1. Accurate coding, using health records, of all diagnoses and procedures relevant to <ol style="list-style-type: none"> a. ER reports b. Outpatient records c. Inpatient records 2. ICD-9-CM coding used to represent varied diagnoses/procedures <p>K. Abstracting: completion of concurrent or discharge abstracts</p> <ol style="list-style-type: none"> 1. Representing varied services exclusive of diagnostic and procedure code numbers 2. Using appropriate procedure manual <p>Coding form and Activity Log Sheet # 6 is due</p>
	<p>L. Adjunct departments: description of major functions/activities of following, with special attention to their relationships to the HIM/MRD</p> <ol style="list-style-type: none"> 1. Admitting Department 2. Patient Accounting 3. Outpatient Registration 4. Unit manager/ward clerk 5. Risk Management/Utilization Review <p>Quality Management/Utilization Review report and Activity Log Sheet # 7 is due</p>
	Turn-in final project report/conduct oral presentations

II. METHODS OF STUDENT EVALUATION MAY INCLUDE ANY OF THE FOLLOWING:

A. Written and oral assignments:

- PPE Activity Log Sheets 7 x 10 or 5 points each= 40 points
 - **Two(2) points will be deducted for each day late past the due date**
 - Completion of required activities and associated forms:
 - **Five (5) points will be deducted for each day late past the due date**
 - Orientation to the Healthcare facility and HIM department 25 points
 - Filing and Retrieval 25 points
 - Assembly and Analysis 25 points
 - Coding 35 points
 - Completion of required reports:
 - Patient Admission Process 30 points
 - Incomplete Record Control 30 points
 - Release of Information (and form) 30 points
 - Quality Management, Utilization Review, Infection Control 30 points
 - Evaluation by Site Supervisor 30 points
 - Evaluation by student 0 points
 - Final Projects:
 - Paper report 50 points
 - Oral Presentation 50 points
- 400 points**

Grading:

- A = 90-100% = >360 pts.
- B = 80-89% = 320-359 pts.
- C = 70-79% = 280-319 pts.
- D = 60-69% = 240-279 pts.
- F = 59% and below <239 pts.

Participation/Attendance: Regular attendance at the facility and at the sessions on campus is necessary for successful completion of the course. Each student is responsible for all material assigned in this syllabus. Poor attendance can reflect in poor achievement. Please make every effort to extend the courtesy of informing the PPE Site Supervisor and the instructor of absences PRIOR to class.

Policies

Course Withdrawing: If for any reason you need to withdraw from this course, be certain that you do so according to College procedure. It is your responsibility to know and follow this procedure. If you simply stop coming to class, without officially withdrawing from the course, your grade is an automatic "F." Please follow official College procedure for withdrawing from this or any course.

College Academic Policies are located in the College Catalog. A copy of the current catalog may be picked up in any of the division offices or admissions. The list of college policies is also available online at <https://www.terra.edu/register/Collegecat/policies.asp>.

Support Services: The College offers a number of support services to assist in your success in this course and all courses. Among these services are the Writing & Math Center in B105, the Office of Learning Support Services, which coordinates the campus disability services and tutoring programs, the computer labs, and the computers in the atriums.

Any student who feels he/she may need an accommodation based on the documentation of a disability should contact the Office of Learning Support Services privately to discuss his/her specific issues. Please contact the OLSS at (419) 559-2208 or visit 100 Roy Klay Hall (Building A) to coordinate reasonable accommodations.

If you have a documented disability and are receiving academic accommodations through the Office of Learning Support Services, please schedule a meeting with your instructor in a timely manner so that we may discuss how these services will be arranged.

Tutoring services are available to students beginning the second week of every semester. Students requesting tutoring services should obtain a tutor request form from the OLSS in 100 Roy Klay Hall (Building A) or online at the Terra website. Please note that instructor verification and acceptance of the Student Learner Agreement is necessary for all tutoring requests. All requests should be submitted to 100 Roy Klay Hall (Building A).