Policy

MSU HealthTeam is committed to providing a safe environment for patients and staff. All patients are entitled to have their medical interactions conducted with appropriate privacy and confidentiality protections.

Informed consent will be obtained for all treatments and sensitive examinations performed.

Patients are entitled to have a chaperone (informal or formal) present for any consultation, examination, treatment, or procedure where the patient considers it necessary. All providers are entitled to have a formal chaperone present at their discretion. Chaperones may be formal or informal, as identified in the Process. Chaperones are required for sensitive exams, treatments or procedures. Whenever possible, clinical staff members should serve as chaperones rather than front office staff or family members. Providers who are contracted to work in non-HealthTeam organizations must follow the policies of that organization.

Purpose

All medical interactions have the potential to be uncomfortable or difficult for patients. Sensitive examinations, treatments, or procedures may predispose patients to feelings of vulnerability and emotional discomfort. Patient response to those feelings will vary based on individual beliefs, religion, culture and experience. Attention to privacy offers important benefits to both patients and providers.

Definitions

1. Chaperone: a parent, guardian, other caretaker, or a staff member. It may not be a student.
   a. Formal chaperone is a HealthTeam staff person or provider.
   b. Informal chaperone is a parent, guardian, adult significant other, or other caregiver consented to by the patient, as appropriate.
2. Informed consent: An explanation of an exam, treatment, or procedure; reasonable alternatives; indications and contraindications; as applicable, and patient verbalized understanding of the discussion.
3. Provider: Any person employed in the HealthTeam who provide consultation, examination, care, treatment, or procedures
4. Sensitive examinations, treatments, or procedures: those that occur with the patient, whether disrobed, partially disrobed or in street clothing, involving the breasts, genitalia, or rectum
Examples include: breast exams, procedures of the pelvic floor or urogenital diaphragm, vaginal or rectal exams.
5. Universal Precautions: An approach to infection control. All human blood and certain body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. Body fluids include: semen; vaginal secretions; cerebrospinal, synovial, pleural, pericardial, and amniotic fluid.

**Process**

1. Always employ appropriate disrobing and draping practices to respect the patient’s privacy.
2. Do not allow medical students or other parties to observe sensitive examinations, treatment, or procedures without the patient’s informed consent.
3. Universal Precautions should be followed for examinations, treatments, or procedures involving the genital, rectal or direct digital contact with oral mucosal areas.
4. Notification to patients of availability of chaperones will be included in a clinic’s ‘welcome letter’ and posted in examination rooms.
5. A clear explanation of the nature of any examination or treatment must be given to the patient. This explanation must also be provided to an informal chaperone when appropriate (e.g., pediatric patient or impaired patient who may be unable to understand or comprehend the explanation.) Informed consent will be obtained for sensitive examinations or treatments.
6. Chaperones are required for all sensitive examinations, treatments or procedures
   a. For any physical examinations of a minor (including sensitive under age 11 years), the parent, guardian, or approved alternate should always be present and may serve as the chaperone. If they are unavailable or the provider has concerns with their ability to appropriately serve as a chaperone, a formal chaperone is required.
   b. Sensitive examinations of patients 11 years of age or greater require a formal chaperone.
7. A formal chaperone will be made available to any patient upon the request of the patient. If one is requested and none is available at that time, the patient must be given the opportunity to reschedule their appointment within a reasonable timeframe.
8. If a patient declines/refuses a chaperone for an examination where one is required the provider must document in the record that an offer was made and declined. The provider retains the final decision whether to proceed without a chaperone. If the provider proceeds with the examination, the patient or guardian must first sign a waiver.
9. In the event a patient requires successive visits for the same sensitive examination, treatment or procedure, a single waiver documentation may be used, given that the duration of the waiver does not exceed twelve months.
10. In the event a provider or clinic medical director believes there exists a compelling reason to waive components of this policy for specific types of patients, approval for that waiver must be requested and granted by the MSU HealthTeam Board, before such a waiver may take effect.

References: AAP: Policy Statement – Use of Chaperones During the Physical Examination of the Pediatric Patient
Federation of State Medical Boards: Addressing Sexual Boundaries: Guidelines
Centers for Disease Control and Prevention: MMWR 1988/37(24);377

Approved by: MSU HealthTeam Board Feb2018