



Chaperone Education From OHSU Health

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Approved by the Oregon Medical Board June 2, 2023

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Before applying this information in practice or situations, we recommend you consult with your legal counsel or other appropriate professionals.

Oregon Medical Board Medical Chaperone Rule 847-010-0130



- Effective July 1, 2023.
- Any Oregon Medical Board licensee must offer to make a trained chaperone physically present for any sensitive medical examination.



OHSU Chaperone Policy

- The law only extends to Oregon Medical Board Licensees.
- However, OHSU is extending the requirement to offer a chaperone to other healthcare professionals performing similar sensitive examinations.

Definition of a chaperone

- A chaperone is a trained observer who serves as a witness during sensitive medical examinations.
- They serve as a witness to what occurred during the examination and verify what happened at the bedside.
- This includes:
 - The actions of the person conducting the exam.
 - The words that are said.

What is a sensitive examination?

- Any examination or procedure that may include exposure of any: breast, genital and/or rectal areas, regardless of age or gender.
- Includes physical contact examinations and visual distance examinations.

The presence of a chaperone during a sensitive examination

- Provides reassurance to the patient about the content of the sensitive examination and the professional intent of the clinician.
- Provides support for the clinicians by serving as a witness to the events taking place.
- The chaperone can clarify should there be any misunderstanding or concern for misconduct.

More simply, a chaperone

- Validates what was done or said during the examination.
- Reports any conduct that was unusual during the examination.



Why have a chaperone?



Frequency of abuse and sexual misconduct

- Between 1999-2015, 3,100 doctors had public accusations of sexual misconduct.
- Misconduct and even coercion may occur when there is a power differential.
- Some medical team members who abuse patients go out of their way to be with a patient alone.
- When present, misconduct and abuse may involve manipulation of conditions to appear as if consent was given.



At OHSU, chaperones are required to be offered

- For patients undergoing a sensitive examination by members of the
 - Independent Privileged Staff.
 - Privileged Staff.

Who are Independent Privileged Staff?

- Medical staff credentialed and privileged for independent practice through Medical Affairs.



Independent Privileged Staff include (offering a chaperone required):

- Medical Doctors (MDs).
- Doctors of Osteopathic Medicine (DOs).
- Doctors of Podiatric Medicine (DPMs).
- Licensed Acupuncturists (LAc).
- Nurse Practitioners (NPs).
- Nurse Midwives (CNM).

Privileged Staff include (offering a chaperone required at OHSU):



- Physician Assistants (PAs).
- Nurse Anesthetists (CRNAs).

Offering a chaperone at other times

- Although chaperones are required to be offered for examinations completed by Privileged and Independently Privileged staff members, a **chaperone can be offered to any patient undergoing a sensitive examination by any workforce member.**

Chaperones can be requested by any patient at any time and that request should be honored.



What if the exam does not include touching a patient?

- A chaperone is required even if the person completing the sensitive examination is standing at a distance from the patient during the examination.
- For instance, when a doctor visualizes a body part from a distance, also called a visual distance examination.

What about during a telehealth visit?

- Chaperones are required to be offered **for all sensitive exams**, even if the visit occurs via telehealth.



What if the patient declines having a chaperone?

- If the person has decision-making ability, they can decline a chaperone.
- However, the medical staff member conducting the exam can also choose not to proceed with the sensitive examination if the patient declines a chaperone.

If the patient declines a chaperone, the medical staff may:

- Choose to proceed with the exam.
- Have a different medical professional perform the exam.
- Put off the examination, which may include rescheduling the patient in the clinic setting.

Documentation of the refusal of a chaperone

- If a patient declines a chaperone the medical staff should document it in the chart using the SmartPhrase, “.chaperone” in the patient’s electronic health record:

“According to OHSU policy, patient was offered a medical chaperone during the sensitive portion of this encounter. Patient has declined to have a chaperone during this encounter.”

What if the patient is not able to consent for themselves?

- If the patient cannot speak for themselves, a chaperone must be present to complete a sensitive examination.
- Examples may include:
 - The patient is sedated in the ICU.
 - The patient has a cognitive impairment, including dementia or delirium.
 - The patient is under the age of consent (15 years old) and their parent or guardian is not there to speak for them.



What if the examination is emergent?

- A chaperone is not required in the case of a life-threatening emergency.
- In this instance, postponing an examination to wait for a chaperone could threaten the life or safety of the patient.



Examples of life-threatening emergencies

- A trauma patient who is found to be pregnant and needs a pelvic exam.
- A patient who has a life-threatening bleeding condition and needs a rectal examination.
- A child who has experienced trauma and needs a full body examination quickly.

Documentation of the Presence of chaperone

- Documentation in the health record is the responsibility of the medical staff member (not the chaperone).
- Use the SmartPhrase, “.chaperone” in the patient’s electronic health record:

According to OHSU policy, the patient and/or guardian was offered a medical chaperone during the sensitive examination during this encounter. Patient has agreed to have a chaperone present during the sensitive examination. The chaperone is Desi, RN.

Best Practices for other clinicians



Having an additional person for other clinicians

- There are times when the presence of an additional person is considered best practice to protect both the medical professional and the patient, even though it is not required by the OMB rule or OHSU policy.

Having an additional person at the bedside is a best practice in some cases.

Example:

- For patient in the ICU who is getting sedating medication and needs a urinary catheter, or a rectal tube placed by a nurse.



Having an additional person is a best practice in some cases.

Example:

- For patients who require peri-care by an RN or Nursing Assistant and may not be able to help with the procedure themselves.

Having an additional person or chaperone at the bedside is a best practice

- For patients under the age of consent, even if a family member is present.

Having an additional person or a chaperone as best practice

- For any patient requiring a sensitive examination by any member of the care team when the patient has:
 - Cognitive impairment
 - Disability that impacts decision making
 - Is under the influence of drugs or alcohol

Can you think of other times when having a chaperone or another person at the bedside might be a good idea?

Trauma-informed care (TIC)

- Trauma-informed care recognizes that people may have had negative life experiences that have caused them trauma.
- This trauma may impact their daily lives and their health care engagement.
- Utilizing trauma-informed care is particularly important for the care of people undergoing sensitive examinations.



Sexual trauma statistics

- According to the CDC, one in four women and 1 in 26 men have experienced a completed or attempted rape.
- Women, LGBTQ2 populations and ethnic minorities have a higher prevalence of sexual trauma than other groups.

Chaperone role in trauma-informed care

- Understand that people may have been impacted by trauma in their past.
- Pay attention to cues from the patient that they may be psychologically uncomfortable in a situation.
- Seek to create a comfortable and safe environment for patients.

Who can serve as a chaperone?



Who can serve as a chaperone?

- An OHSU health care workforce member who holds an active Oregon license to practice a health care profession *or* who has completed this training approved by the Oregon Medical Board.
- The following team members are examples of those who can serve as a chaperone with or without training:
 - Any physician (MD/DO), Nurse Practitioner, Nurse Anesthetist, Nurse Midwife, or Physician Assistant
 - Registered Nurses
 - Physical Therapists
 - Respiratory Therapists



Who can serve as a chaperone?

- The following team members can serve as a chaperone with or without training:
 - Another physician licensed in Oregon
 - A Nurse Practitioner or Physician Assistant
 - Registered Nurses
 - Physical Therapists
 - Respiratory Therapists



If you fill one of the following roles, you can chaperone sensitive medical exams after completing this training:

- Medical Assistants or Certified Nursing Assistants
- Scribes
- CSAs
- Patient Safety Attendants
- ED Technicians
- Interventional Technicians
- Research Associates
- Anesthesia Technicians
- Other roles as assigned by your department or specialty area.



Who else can serve as a chaperone?

- OHSU Health employees who have completed this full training.



Who cannot be a chaperone?

- A personal friend or family member of the patient.
 - Their relationship with the patient makes them unable to be a neutral observer.
 - If a family member stays in the room, a chaperone is still required to meet the chaperone requirement.
- Students (unless they wish to complete a course for medical chaperones outside their role as a student).

Who cannot be a chaperone?

- A personal friend or family member of the health care professional completing the exam.
 - In the same way that a patient's family member may not be neutral a family member or personal friend of the examiner may also not be neutral.

A team member who is not licensed in Oregon or has not completed this training cannot serve as a chaperone.

What about medical students, residents, or other learners?

- The primary role of the person learning is to learn, not to supervise a procedure.
- The supervisory relationship may make it difficult for them to be a neutral observer.

Residents and Fellows

- Our residents and fellows are licensed in Oregon.
- We generally discourage the use of residents or fellows in the chaperone role, but recognize that occasionally, fewer people in the room during a sensitive examination will be more comfortable for the patient.
- In those rare cases, a resident or fellow may serve as a chaperone.

Requests for a chaperone with specific characteristics

- If a patient/patient representative requests a chaperone of a certain characteristic, such as gender, this may be permissible if
 - A chaperone is available to meet that request.
 - The request meets the criteria of requesting based on modesty or history of trauma.



Patients cannot refuse professionals or chaperones based on discriminatory reasons such as race

- Inform the patient that we cannot honor that request.
- Involve your supervisor, the AOD, or the patient advocate office.
- See *Requests for or Refusal of Healthcare Professionals or Other Personnel with Specific Characteristics* for more details.

The role of the chaperone

Patient preparedness for the presence of a chaperone



Before the exam

- Sensitive examinations occur across many settings – the ED, inpatient environment, ambulatory clinics, and imaging sites.
- Allowing sensitive conversations between the health care professional and the patient is important.
- The chaperone does not have to be in the exam room prior to the exam/procedure starting.

Explaining the procedure

- The health care professional performing the sensitive examination should explain to the patient:
 - the examination or procedure being performed.
 - the reason for the examination or procedure.
 - what the patient might experience during the examination or procedure.



Introduction

The health care professional performing the examination will likely introduce you. However, if they do not you should introduce yourself.

Examples:

“Hello, I am Desi, I use she/her pronouns. I will be your MA today, and I will be the chaperone for your exam.”

“Hello, my name is Todd, I use they/them pronouns. I am a nurse here, and I will be your chaperone during your procedure.”

Respectful patient encounters include the following:

- Addressing the patient by name.
- Using their pronouns.
- Using patients preferred terminology for their body parts.

Chaperone conduct

- Being a chaperone requires a high level of trust from both the clinical team you support and the patients and families you work with.

Chaperones must always follow

- OHSU Code of Conduct.
- OHSU Dress Code.
- HIPAA.
- Information privacy and security compliance.

Remaining neutral

- Refraining from commenting on what you are seeing in the examination.
- Refrain from making jokes or telling personal stories at the bedside.

Patient privacy and dignity

- The health care professional and chaperone should always make sure the patient is as covered as much as possible both during and between exams.

Gowning and draping

- If a patient is asked to remove their clothing, they should be offered a gown and/or drape for privacy.
- If the patient is only partially undressed, they should be offered a drape to cover themselves until the examination or procedure begins.

Draping a patient

- If the patient has a vaginal, penile, or rectal exam, they will be given a sheet or blanket.
- The patient will place the blanket over the bottom half of their body, covering them from the waist down.

For a breast examination

- A patient will be asked to undress from the waist up.
- They will be given a gown to cover the top of their body until the examination begins.

Patient privacy for independent patients

- Independent patients can do most daily activities themselves.
- If the patient can, they should be allowed to undress themselves.
- When a patient is undressing, they should be given complete privacy if possible.
- Both the health care professional and the chaperone should leave the room.

Helping a patient to undress

- If a patient needs help to undress, the chaperone may assist them with the patient's permission.
- However, the medical professional performing the exam should not assist the patient to undress without a witness.

During the examination



Your role as the chaperone

- As a chaperone, it is important that you can fully observe the examination and what the examiner is doing at all times.

Position in the room

- You should have a clear and unobstructed view of the examination area.
- This includes seeing where the medical professional touches the patient.
- If the medical professional moves and obstructs your view, move yourself to a position where you can best observe.
- If you still cannot see, politely ask the medical professional to shift their position so you can see the entire examination.

Chaperones are distraction-free

- You should not be distracted by documentation, a personal device, or performing another task that blocks your ability to fully view the examination.

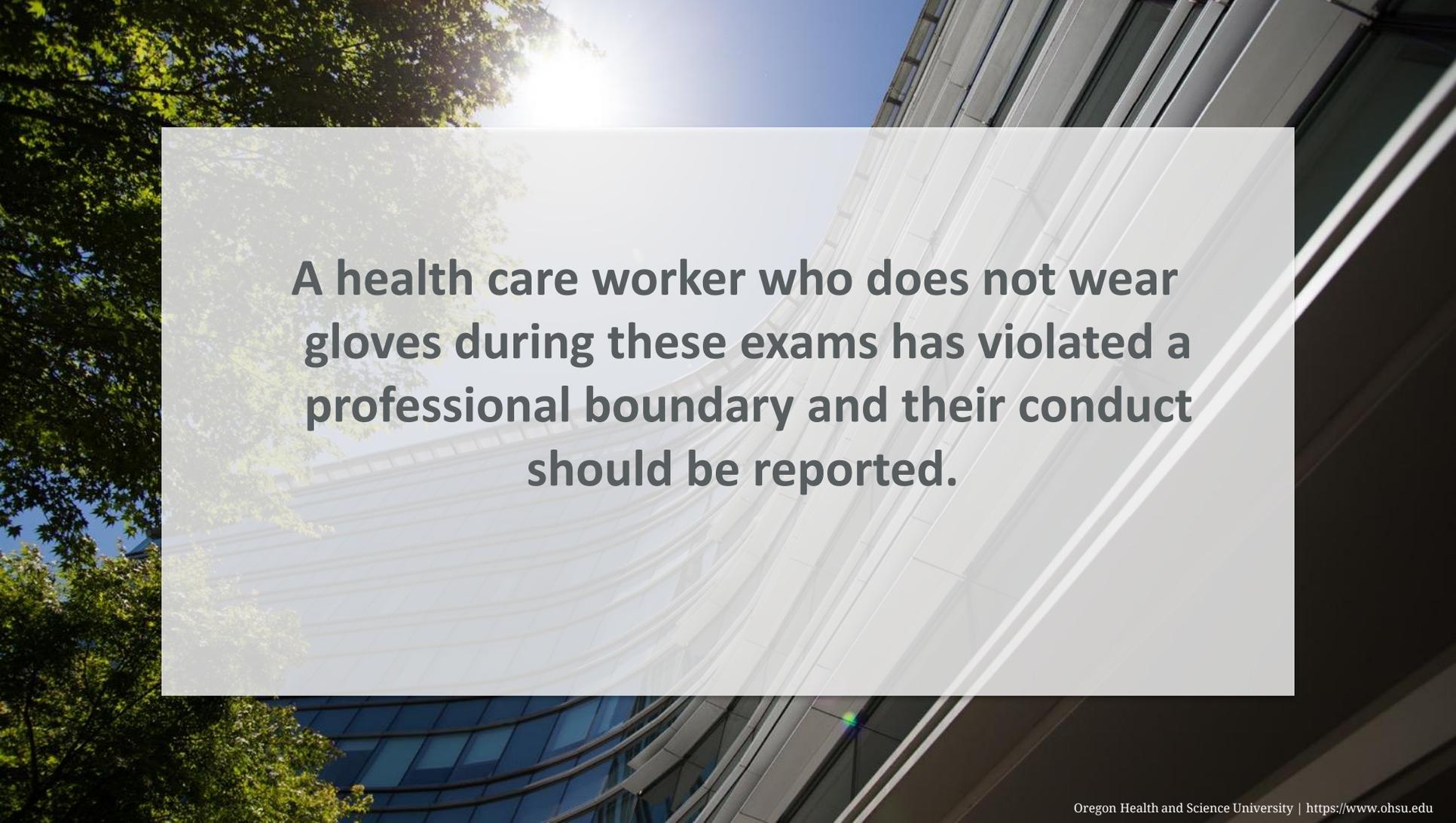
During the exam

- You may not leave the room while chaperoning a sensitive exam.
- Even leaving to grab a piece of equipment once the exam has begun is **not** allowable.
- Call for another colleague to get the extra piece of equipment or have the health care professional exit the room with you.

Infection prevention and professionalism



- Both the chaperone and the health care professional are expected to adhere to OHSU infection prevention policies during the examination.
- Health care workers should always wear gloves for any examinations of the genitals, rectum, pelvis, or inside of the mouth.
- Gloves are not required for a breast exam but are worn by many professionals anyway.



A health care worker who does not wear gloves during these exams has violated a professional boundary and their conduct should be reported.

How can you help to make a patient more comfortable during a sensitive exam?

- Ask the patient what they prefer to be called.
- Use a patient's preferred name and pronouns.
- Ask before touching a patient.

Key things to look out for during a sensitive examination

The professional conducting the exam should:

- Ask the patient before touching or examining a sensitive area.
- Keep areas that are not being examined covered.
- Explain each part of the exam as it is being performed.
- Encourage the patient to report anything that feels painful or uncomfortable.
- Only examine the areas previously discussed and that the patient consented to have examined.

Examples of gross misconduct

- Deliberately watching a patient undress.
- Performing examinations without a need.
- Performing examinations of the rectum, vagina, or penis without gloves.
- Having sexual intercourse with the patient.
- "Groping" or touching the patient in a way that seems sexual.

STOP

- If you notice gross misconduct, you have the right to stop the exam and to ask the professional to leave the room.
- All health care workers who witness patient abuse must report that abuse.



All gross misconduct needs
to be reported

How to stop a medical examination: USE ARCC

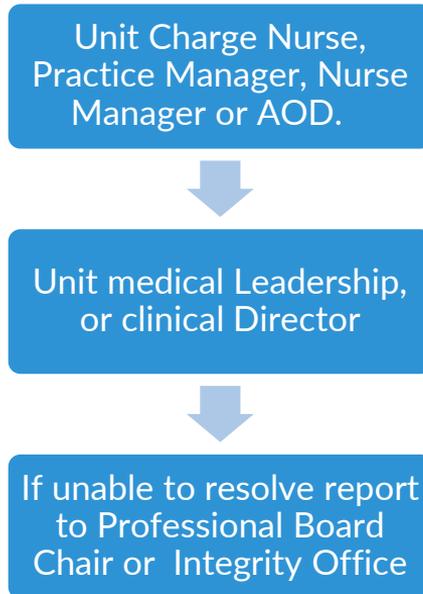
- Ask the medical professional if they can talk with you in the hall.
- **R**equest that the professional make a change to their behavior.
- Tell the professional that you are **C**oncerned about what you saw in the room.
- Report what you saw to the medical professional's superior and your supervisor. (**C**hain of Command).

What if you did not stop the exam?

- Report your concerns to your supervisor or a trusted leader in your department even if you did not stop the exam.

What if I am not sure if what I saw was appropriate?

Utilize your Resources:



Verbal harassment

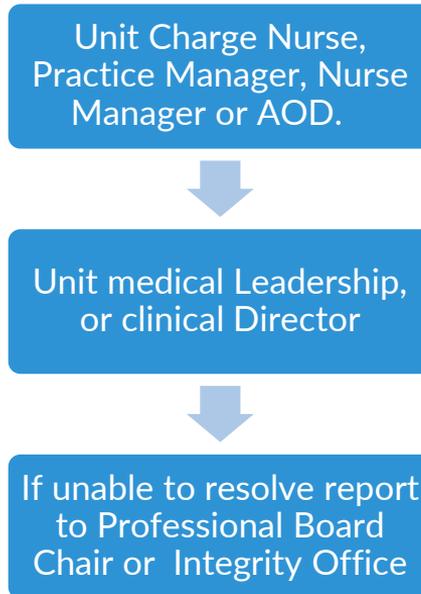
- A chaperone should be on the lookout for potential verbal harassment of the patient during the examination.
- Verbal harassment may be difficult to distinguish.
- If remarks made at the bedside appear to make either the patient or the health care professional uncomfortable or seem to be too intimate or personal in nature you should escalate your concerns.

Examples of verbal harassment

- Telling sexual jokes.
- Commenting on the way the patient looks.
- Commenting on the patient's body parts in a sexual way.
- The medical professional sharing details of their own personal sexual history.
- Asking a patient out on a date.
- Offering to see a patient "after hours."

What to do if you witness verbal harassment?

Utilize your Resources:



Other ways to report at OHSU

- Charge Nurse/Clinic Leadership
- Department Director or Manager
- Department Chair or Medical Director
- Human Resources
- Department of Public Safety
- Integrity Hotline

Non-retaliation

- OHSU prohibits retaliation against individuals who file a complaint, or who participate in an investigation.
- Failure to report in compliance with OHSU's policies may cause additional harm to the involved individuals, expose you and OHSU to legal liability, reputational harm, and/or result in disciplinary action.

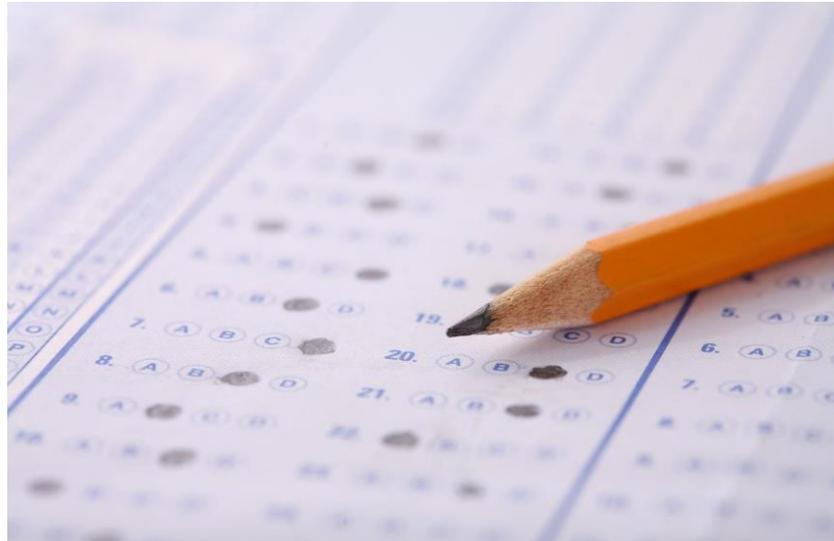
Conflict management

- Confronting or reporting suspected abuse can be hard.
- If you are interested in honing your conflict resolution skills, check out the CWE O2 page for the Conflict Management Course Series.

Examination specific education

- Depending on the area you work, you will get specific information regarding the examinations you are chaperoning.
- See the Medical Chaperone Job Aids for more information.

Post test



The role of the chaperone is to...

- a) Hold a patient's hand if they experience discomfort.
- b) Be a witness for both the patient and the medical team member on what happened at the bedside.
- c) Support a friend or family member of the patient who acts as a witness.
- d) Get equipment for the doctor so the procedure is not interrupted.

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- a) Hold a patient's hand if they experience discomfort.
- b) Be a witness for both the patient and the medical team member on what happened at the bedside.
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True or false

- It is ok for me to stay at the head of the bed with the patient during a sensitive exam, so I do not embarrass the patient.

True or False

- The chaperone must always be able to see the details of the sensitive exam or procedure being performed.

True or False

- It is ok for me to engage in talking to the doctor about the recent Timbers game I went to or my date last weekend during the patient's exam.

True or False

- I must remain professional and neutral during a medical exam. It would be inappropriate to talk about my personal life during this time.

True or False

- The doctor forgot to grab a swab they needed for the exam. It is ok for me to step out of the room to grab the swab, I will only be gone for a minute.

True or False

- As a chaperone, I am not allowed to leave the room during a sensitive exam. If the doctor needs additional equipment, we must ask another person to grab it or both the doctor and I must exit the room together.

Scenario 1

- You notice the Nurse Practitioner you are chaperoning with makes a comment about how "sexy" the patient looks today. What do you do?

NP comments on patient's looks as "sexy"

- a) Nothing. The patient does look nice today. The NP probably did not mean anything harmful by the comment.
- b) Report the incident to your supervisor or manager after the exam or to another trusted leader.
- c) Tell another staff member on the unit about what the NP said.

NP comments on patient's looks as "sexy"

- a) Nothing. The patient does look nice today. The NP probably did not mean anything harmful by the comment.
- b) Report the incident to your supervisor or manager after the exam or to another trusted leader.
- c) Tell another staff member on the unit about what the NP said.

Scenario 2

- The patient declines a chaperone, and the physician is uncomfortable proceeding with the sensitive exam. This is not an emergency situation.

Scenario 2: The physician is uncomfortable performing the exam. What should the chaperone do?

- a) Nothing, the physician still must perform the exam even if there is no chaperone.
- b) Ask another qualified colleague to perform the exam.
- c) Reschedule or postpone the sensitive portion of the examination.

Scenario 2: The physician is uncomfortable performing the exam. What should they do?

- a) Nothing, the doctor still must perform the exam even if there is no chaperone.
- b) Ask another qualified colleague to perform the exam.
- c) **Reschedule or postpone the exam.**

Scenario 3

- Dr. Jones is late to rounds and needs to perform a rectal exam on Mrs. Smith who is getting medication for sedation. The nurse is in another patient's room. No one else is available to chaperone. What should Dr. Jones do?

Scenario 3 in the ICU and no chaperone available

- a) Go ahead and do the exam himself. Mrs. Smith won't remember anyway, and Dr. Jones is already running late.
- b) Wait until the nurse is finished in the next patient room.
- c) Go see his next patient and postpone the exam until later when a chaperone is available.
- d) Either B or C.

Scenario 3 in the ICU and no chaperone available

- a) Go ahead and do the exam himself. Mrs. Smith won't remember anyway, and Dr. Jones is already running late.
- b) Wait until the nurse is finished in the next patient room
- c) Go see his next patient and postpone the exam until later when a chaperone is available.
- d) **Either b or c**

Scenario 4

- You notice that Dr. Andrews, the chief of the department, did not put on gloves to perform a vaginal examination on his patient.

Scenario 4 Dr. Andrews did not wear gloves

- a) Dr. Andrews is the chief of staff. He probably knows what he is doing. I should not report this.
- b) Wearing gloves during a vaginal exam is required. I should either stop the exam or report Dr. Andrews.
- c) Dr. Andrews is "old-school." No one wore gloves when he started. It is just an old habit. I won't report it.
- d) I will remind Dr. Andrews later that he should have worn gloves. I will report him if I see him do it again.



Scenario 4 Dr. Andrews did not wear gloves

- a) Dr. Andrews is the chief of staff. He probably knows what he is doing. I should not report this.
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Questions?



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**Thank you for
completing this training!**