

Medical training progression and supervision roles in clinical settings

	Undergraduate Medical Education = students (4 to 5 years)				Postgraduate training = Residents (2 to 6 years)
	MED-P STUDENTS	MED-1 AND MED-2 STUDENTS	MED-2 STUDENTS	MED-3 AND MED-4 CLERKSHIP STUDENTS	R1 TO R6 RESIDENTS
I am doing...	Basic Science Courses	Fundamentals of Medicine and Dentistry (FMD) + Longitudinal Family Medicine Experience (LFME)	Transition to Clinical Practice (TCP) (January to June)	Clinical Rotations and Learning Activities (Clerkship)	Family Medicine Residency (2 years) Residency in other specialties (2 to 6 years)
You will see me...	In optional clinical observership*	In optional clinical observership + in clinical placement in Family Medicine (LFME)*	In clinical observership (TCP) + in optional clinical observership*	In clinical rotations in various settings	In clinical rotations in various settings
I can...	Shadow only	Shadow + In the LFME course, I can take patient histories and perform physical exams under supervision	Shadow + In TCP courses, I can: • Take patient histories and perform physical exams under supervision • Perform additional tasks under direct supervision (e.g., assist in surgery)	• Take patient histories, perform physical exams and procedures • Develop differential diagnoses and management plans in patient notes • Work under supervision (e.g., assist in surgery) • Help filling out orders (always co-signed): medications, diagnostic tests, and discharge orders Everything I do must be validated and co-signed by my supervisor.	Supervise medical students on rotation + • Take patient histories and perform physical exams • Prescribe medications, diagnostic tests, and referrals in collaboration with my supervisor • Formulate diagnoses and management plans • Pronounce death • Perform interventions or surgical procedures independently, at my supervisor’s discretion and based on my level • Give verbal orders • Help complete: – Discharge documentation – Forms (e.g., insurance, SP-3 death certificates)
I cannot... 	Perform medical acts	Perform medical acts during optional clinical observerships*	- Prescribe medications, diagnostic tests, or discharge orders - Complete forms - Pronounce death - Lead discussions on care goals, risks, and procedure benefits with patients and their families	Prescribe without supervisor co-signature: • Medications • Diagnostic tests • Discharge orders - Complete formularies - Pronounce death - Give verbal orders	- Sign forms, e.g., insurance documents, SP-3 (death certificate) forms
Who should you contact if something happens with a patient?			*Details specific to sites and disciplines	*Details specific to sites and disciplines	*Details specific to sites and disciplines

SUPERVISION ACTIVITIES - ATTENDING PHYSICIANS OR SUPERVISING PHYSICIANS

I am responsible for...

- Supervising residents and clerkship students by reviewing cases, verifying histories and physical exams when needed, reassessing patients, and providing case-based teaching
- Co-signing notes written by clerkship students and residents
- Validating and signing prescriptions, orders, and requisitions made by clerkship students
- Signing various forms: insurance, death certificates (SP-3), work stoppages, CTMSP, etc.
- Signing discharge summaries, operative reports, and final reports
- Authorizing patient discharges

* Optional observerships involve shadowing a healthcare professional in their clinical practice, whether in medicine or in another health profession. Students participating in optional observerships are not authorized to perform any clinical tasks, such as taking patient histories, conducting physical examinations, or performing technical procedures.