

Use of Chaperones Clinical House Wide Policy		
Applicable Campus	Department Name	Approval Authority
Salem Health and West Valley Hospital	General Clinical House Wide	SHMG Director, Nursing and Clinical Practice
Effective Date: March 2023 SH Effective Date: March 2023 WVH		Next Review Date: February 2026 SH Next Review Date: February 2025 WVH
List Stakeholders Position or Committee	Document Status	Date of Approval
SHMG Director, Nursing and Clinical Practice	Revised	12/2022
WVH Director, Clinical Operations	Reviewed	12/2022
SH Chief Nursing Officer	Reviewed	02/2023
Clinical Leadership Group	Reviewed	12/2022
Medical Executive Committee	Revised	02/2023
WVH Medical Care Advisory Committee	Reviewed	01/2023
SHMG Director, Nursing and Clinical Practice	Reviewed	02/2023
Final Approval Date SH	Final Approval	02/2023
Final Approval Date WVH	Final Approval	02/2023

Describe briefly the most recent revision made to this policy, procedure or protocol & why:

Added/revised language to align with Oregon Medical Board medical chaperone rule OAR 847-010-0130 enforceable July 1, 2023.

Policy Content

This policy provides professional instruction regarding the use of medical chaperones for credentialed providers & Advanced Practice Providers (including Certified Nurse Midwives), in all medical specialties working at Salem Health Hospitals and Clinics' direction. It is intended to provide reassurance about the context and content of sensitive examinations and safeguard all patients and staff from any misconduct, misinterpretation of actions or unfounded allegations of impropriety as part of consultation, physical examination, treatment and care.

Steps/Key Points Procedure

A trained chaperone must be offered to physically accompany credentialed medical & Advanced Practice providers during all genital and rectal examinations regardless of gender and breast examinations for patients who identify as female. The same standard is applied to virtual examinations in which genital, breast or rectal areas may be viewed during a virtual/telemedicine visit. In general, minors 15 years of age or older are able to consent to medical services without parental consent in Oregon. Prior to age 15, parent/legal guardian may accept or decline a chaperone on the patient's behalf. Minors of any age may be able to accept or decline a chaperone for reproductive health services (outlined in ORS 109.610 and 10.640 (1)). A chaperone must also be offered by the OMB licensee for sensitive exams for newborns to include diapering and perineal care. Patients or clinicians may request a chaperone for any other type of examination.

A provider is not required to offer a chaperone if a medical chaperone is already present in the normal course of the examination or if failure to examine the patient could result in significant and imminent harm to the patient, as in the case of a medical emergency under the Board Order requires a chaperone be present.

A medical chaperone must hold an active Oregon license to practice a healthcare profession or complete a course for medical chaperones approved by the Oregon Medical Board (as of 7/1/2023).

A support person (parent/guardian/family member/friend) may be present for emotional support, but does not substitute as a chaperone.

If a patient (or parent as allowed) declines a chaperone, the clinician may defer the examination for protection of their clinical practice and the patient or may perform the examination and document the patient's consent to proceed without the presence of a chaperone.

Role of Chaperone:

- Provide emotional comfort and reassurance to the patient
- Protect patient's modesty and ensure parts of the patient's body are not unnecessarily exposed
- Serve as a witness to identify misunderstandings or concerns for misconduct to include unusual or unacceptable behavior on the part of the clinician
- Protect clinician against allegations of abuse
- Assist in the exam, if authorized to do so by training and if the tasks do not interfere with the chaperone's ability to observe the clinician's actions and behavior
- Report any noted concerns to clinic/unit leadership immediately following exam if applicable

The presence or refusal of a chaperone should be documented in the clinical notes to include the chaperone name, role and credentials (if applicable). If a chaperone is declined, documentation should include date of declination and reason if known.

Definitions – Insert N/A if not applicable
<ul style="list-style-type: none"> • Chaperone: is a third party to a clinical examination, who aims to provide support and reassurance to the patient. They are able to discourage unfounded allegations of improper behavior by acting as a witness to the procedure. • Credentialed Provider: A credentialed provider is considered an MD, DO, DPM, DDS, DMD, PA, NP and CNM credentialed and privileged at Salem Hospital.
Equipment or Supplies - Insert N/A if not applicable
N/A
Form Name and Number or Attachment Name - Insert N/A if not applicable
N/A
Expert Consultants Position
N/A
References (Required for clinical Documents and within the last five years) :
OAR 847-010-0130; FAQ Medical Chaperones.pdf (oregon.gov)
Related CBT's, Policy, Procedure or Epic Protocol Cross Reference Information – Insert N/A if not applicable
N/A
Computer Search Words
N/A
Is there a Regulatory Requirement? No
N/A

Review and Revision History		
History	Review or Revision	Date
Added/revised language to align with Oregon Medical Board medical chaperone rule OAR 847-010-0130 enforceable July 1, 2023.	Revision	03/2023
90 day due date extension from 12/30/2022 to 03/30/2023.	Revision	11/2022
Added Salem Health campus and WVH to previous SHMG policy. Revised to include house wide ambulatory areas and WVH to assure all patients are treated with dignity, respect, and that physical examinations are conducted in a professional manner.	Revision	01/2021
	Review	10/2016
New policy	New	09/2014