

A Tool for Audit of Hospital Charting of Functional and Cognitive Status by Year Four Medical Students: A Pilot Study

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1. Purpose

Florida State University has a mandate to teach geriatrics in all 4 years of the medical curriculum. All students are trained to conduct brief cognitive and functional assessments as part of the routine physical exam. Cognition and function are often not documented yet known to predict clinical outcomes.

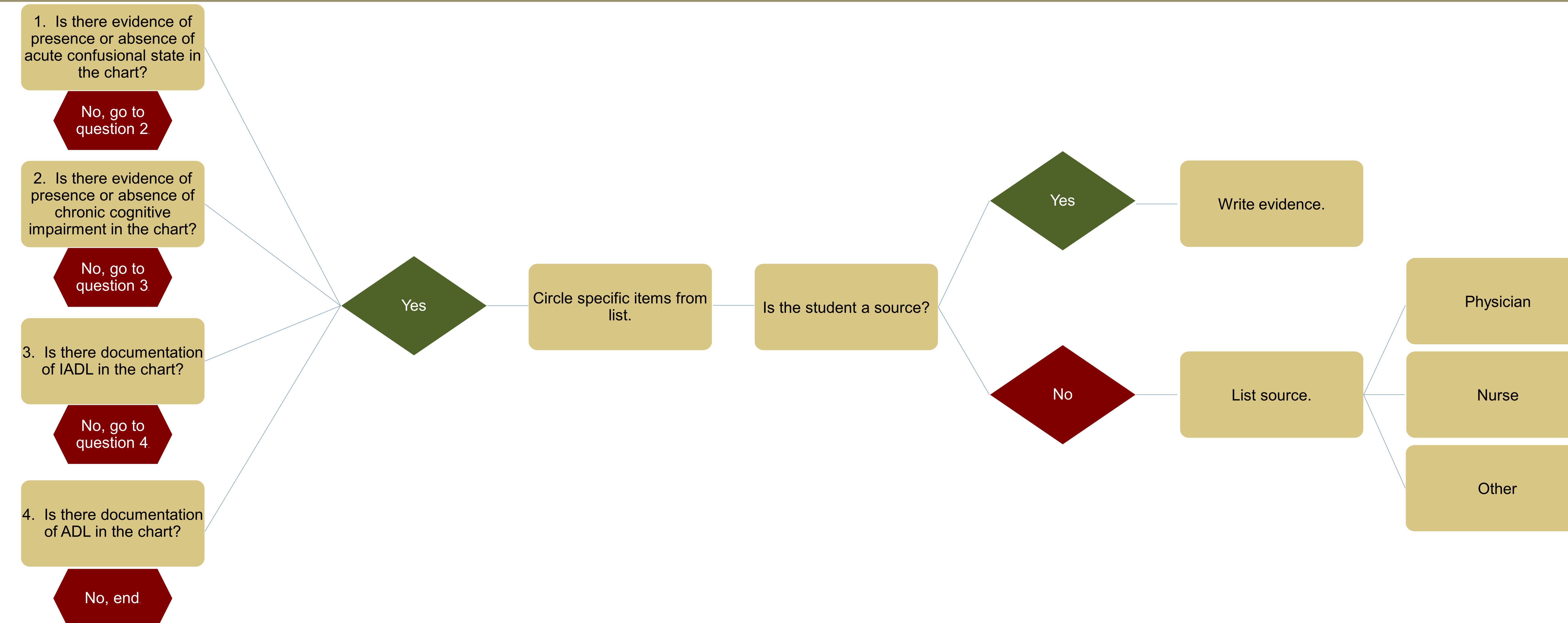
The purpose of this study was to determine how often 4th-year medical students were charting the cognitive status and functional ability of their geriatric in-hospital patients prior to the required 4th-year rotation in geriatrics. We were interested in seeing whether geriatric teaching in years 1 & 2 would lead students to use their geriatric training when seeing patients on non-geriatric rotations.



2. Methods

- We designed a tool to abstract hospital charts targeting any mention of cognitive status and functional ability.
- Trained research assistants used the tool to code student's charting of acute confusional state (ACS), chronic cognitive impairment (CCI), Activities of Daily Living (ADLs), and Instrumental Activities of Daily Living (IADLs).
- We reviewed records for patients over the age of 65. The average age was 78.
- 10 students were consented and an average of 2 to 3 charts were reviewed for each student (N=26).
- 58% of the charts were reviewed by both research assistants with an agreement rate of 81% between auditors.

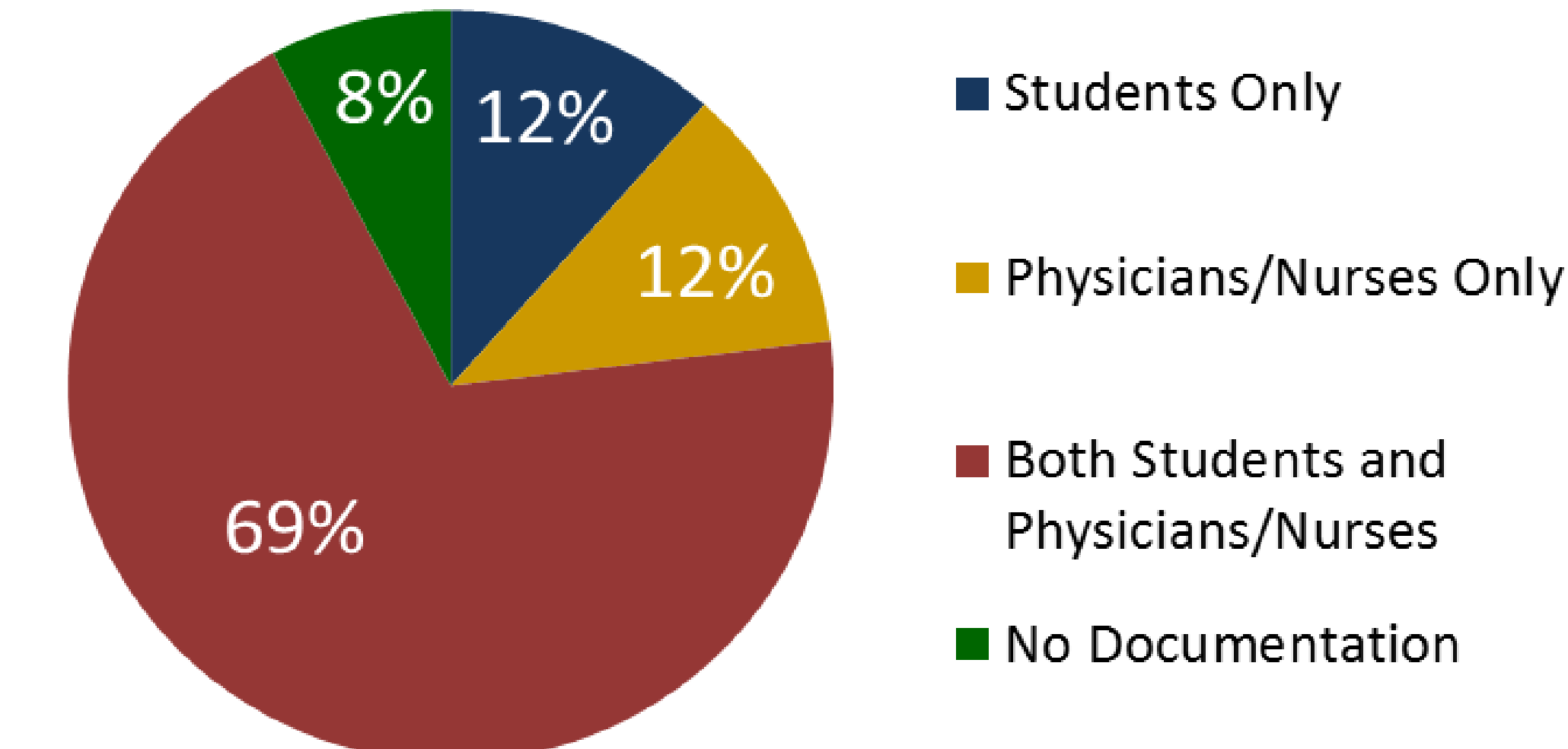
3. Chart Abstracting Tool Design



4. Results

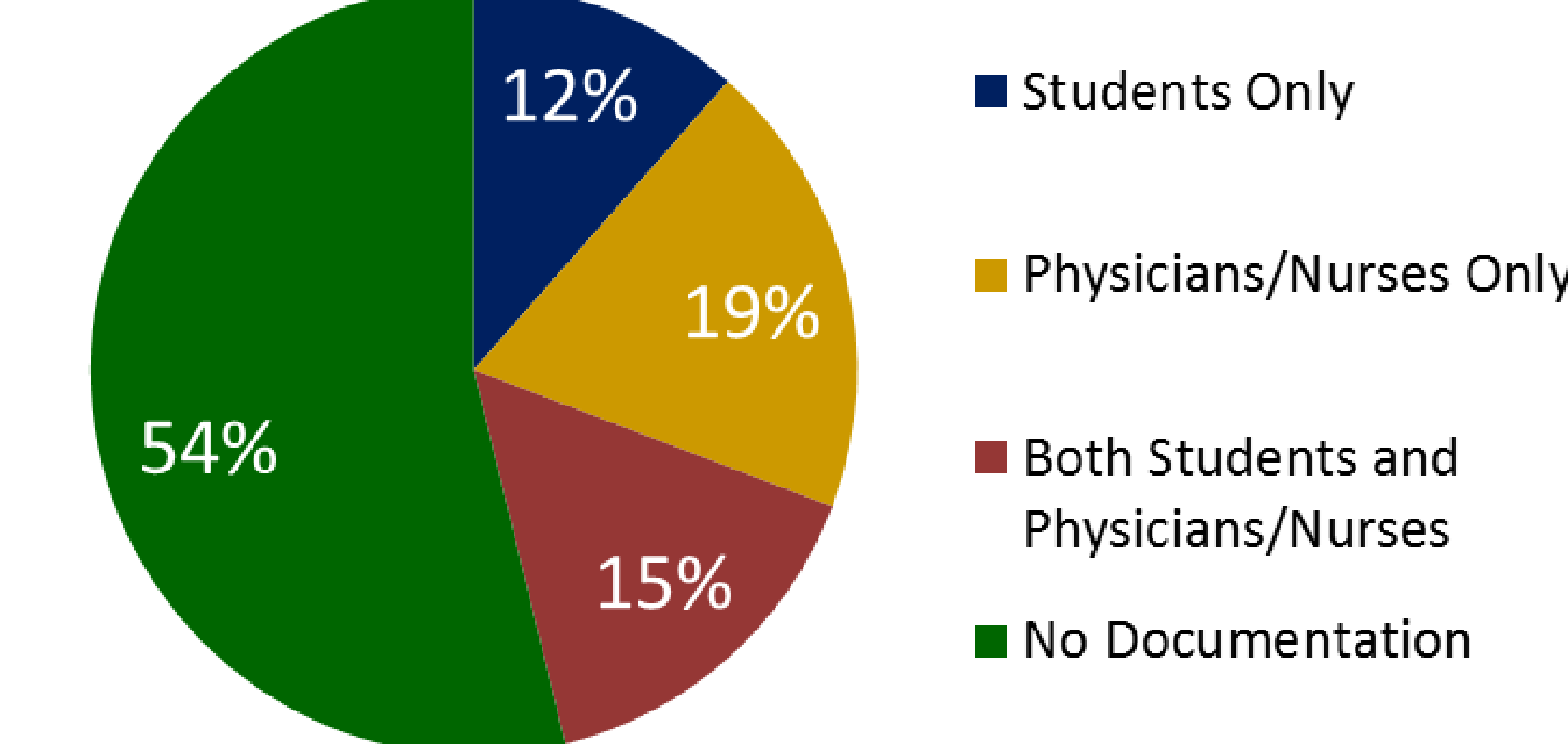
Cognitive Status

Documentation of Chronic Cognitive Impairment (CCI)

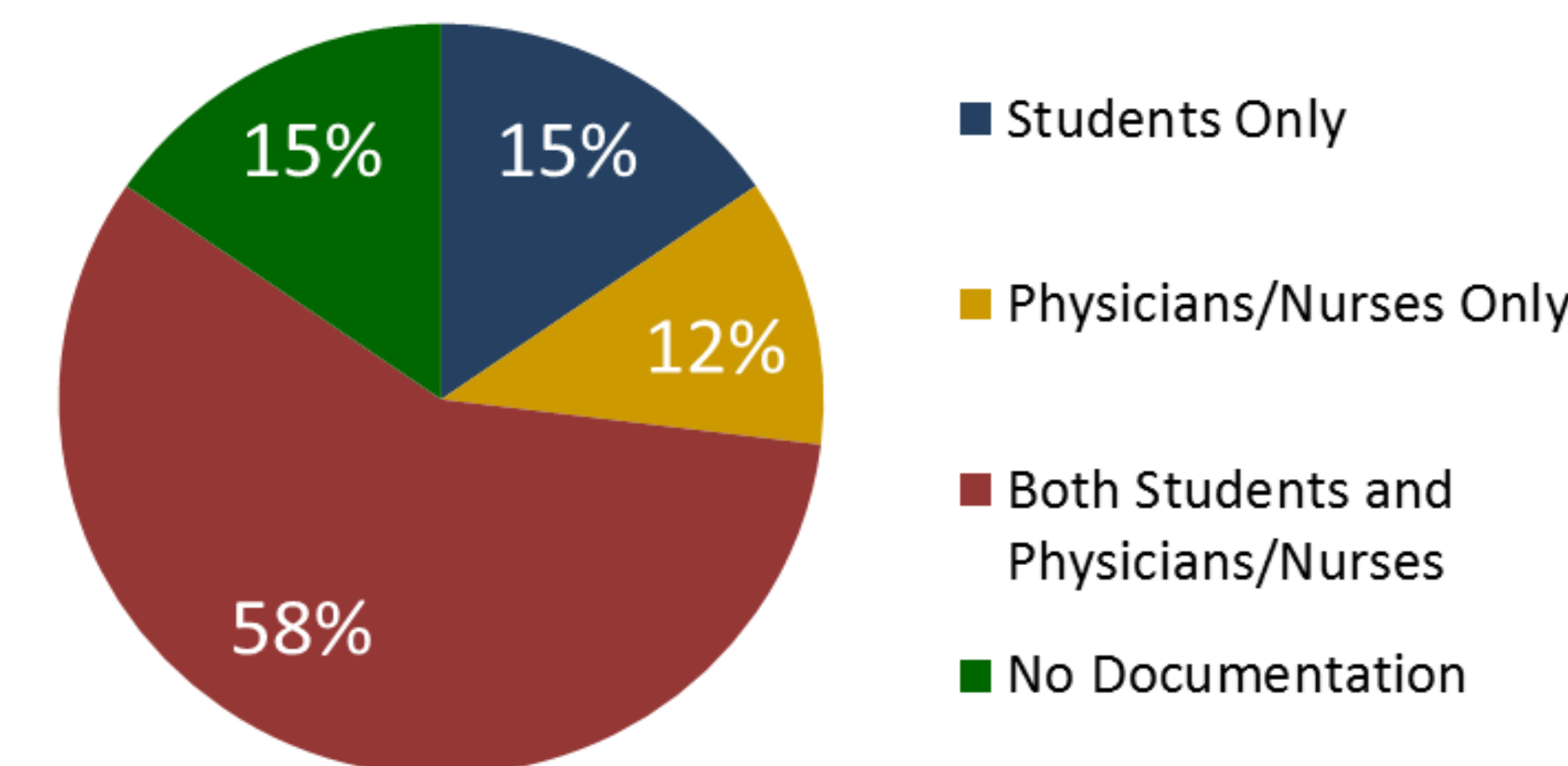


Functional Ability

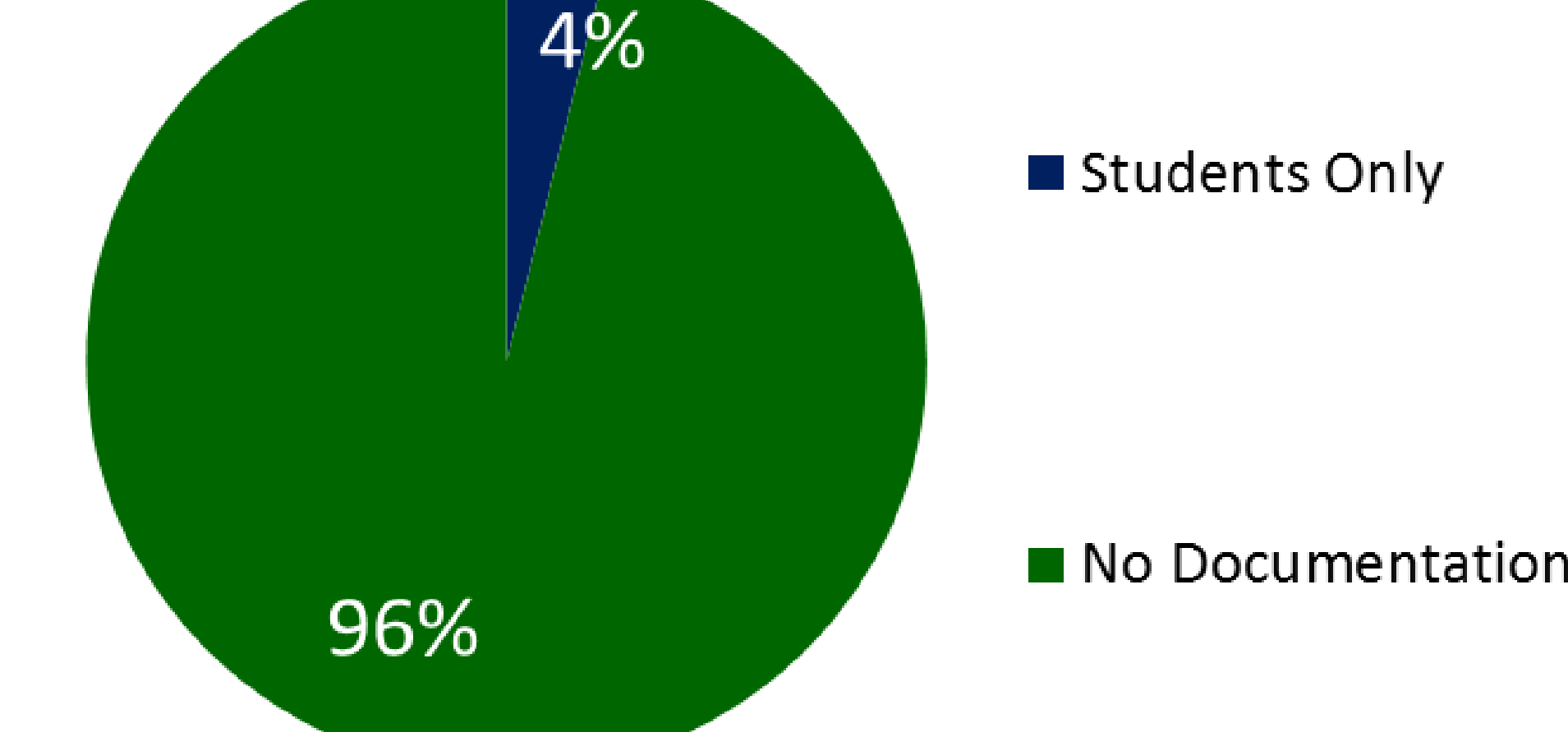
Documentation of Activities of Daily Living (ADLs)



Documentation of Acute Cognitive Status (ACS)

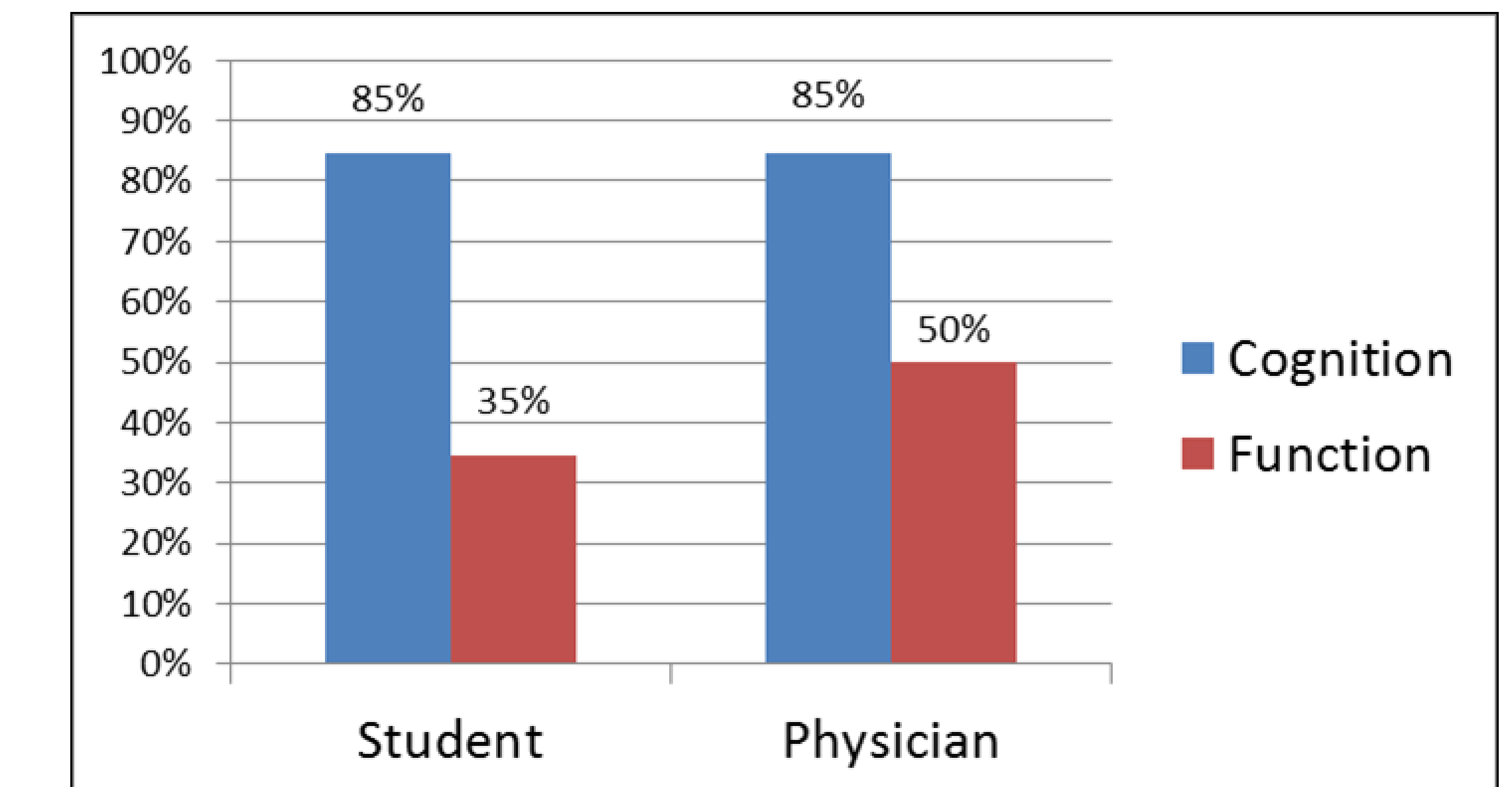


Documentation of Instrumental Activities of Daily Living (IADLs)



5. Conclusions

- The students and physicians show similar documentation rates in their charting.



- There is clearly more documentation by students and physicians of cognitive status than documentation of functional ability.
 - Functional ability may be documented less than cognitive status because it takes more time to assess in the hospital setting or it may reflect the sensitivity of the abstract tool.
- While the low documentation of functional abilities is similar to other studies using retrospective chart review, overall documentation of cognitive status was substantially higher.
 - This may reflect the impact of the student on the physician.
 - We hope to see an increase in documentation of both cognitive status and functional ability in patients' charts after the students complete their Primary Care Geriatrics Clerkship.
- It is possible to train non-physician research assistants to use a chart abstracting tool to gather reliable data.

6. References

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