



# **PBI Medical Record Keeping Course**

Facilitated Live, Intensive, Small Group Format  
*Remedial and Interventional\**

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In Joint Providership with the University of California, Irvine School of Medicine

**UCI** School of Medicine



17 CME Credit Hours\*\*

*Approved for AMA PRA Category 1 Credits™*

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## **\*Note:**

This comprehensive course addresses record keeping deficiencies to fulfill educational recommendations or requirements. Course faculty review each participant's pre-course assignment submissions, including referral documentation, to personalize instruction and address specific concerns or practice gaps.

Clinicians who wish to take the course solely for CME credit are welcome to enroll.

## **\*\*Extended Edition - Post-Course Follow-Up:**

The Extended Edition provides a longitudinal educational experience, offering continued accountability and 13 additional CME credit hours. See page seven for details.

## Summary

Deficiencies in medical record keeping are a common reason for referral to a remedial course, yet many clinicians fail to recognize why they are being held to account for what they may consider a chore—even a distraction from patient care. This two-day course illustrates why the process of keeping complete, clear, and accurate medical records is critical to the responsible provision of patient care and explores perceived obstacles to adhering to better practices. Pre-course record review, readings, and written assignments set the stage for the live course. Participants arrive at the seminar primed to examine their infractions.

The course is facilitated in a highly interactive, small-group format and taught by one primary faculty member who reviews each participant's pre-course assignment submissions. This pre-review allows faculty to be aware of each participant's unique background and cause(s) for referral and use this information to structure and personalize their facilitation of each course. Participants are guided to see where they initially went astray, gain critical insight into why it happened, and are held accountable to prevent future missteps by creating and presenting a Personalized Protection Plan®. This novel framework for remediation is known as the PBI Method®, a process-oriented approach to achieve impactful and lasting educational intervention.

## Reasons for Referral

Common reasons for referral to this course include:

- Billing inaccuracies
- Coding inaccuracies
- Documentation that does not comply with laws & regulations
- EMR: inaccuracies, "copying and pasting"
- Incomplete or illegible records
- Other record keeping deficiencies as determined by employer, regulator, or law

## Course Objectives

Upon completion, participants should be able to:

- Describe how to maintain compliance with laws regarding medical record keeping
- Improve documentation in support of appropriate billing codes, regulations, and expectations
- Document with clarity to reduce misinterpretation and errors
- Provide improved documentation for risk management
- Apply improved skills for maintaining electronic medical records
- Create and implement a Personalized Protection Plan® that includes strategies, safeguards, and systems to reduce the risk of relapse and improve accountability

## Faculty

Faculty for this course are selected by PBI and approved by the University of California, Irvine School of Medicine Office of Continuing Medical Education.

## Pass/Fail Criteria

This interactive course has specific objectives to accomplish within the designated time frame. Participation in discussions is required throughout. To pass and qualify for the CME credit hours, attendees must be present and participate for the full duration of the course.

Upon conclusion of the course, pass/fail determinations are made on an individual basis, at the discretion of PBI and in accordance with course accreditation standards. Determinations are based on the following:

- Demonstrated understanding of educational content
- Demonstrated ability to achieve the learning objectives
- Compliance with course requirements including submission of pre-course assignments, adherence to participation and engagement standards, and passing the final oral examination at the conclusion of the course (i.e., presentation of a comprehensive Personalized Protection Plan©).

*An additional graded, written final examination can be made available upon request when required by a regulatory agency, board, or college. Requests must be made in writing to PBI Education **prior** to course commencement.*

## Post-Course Participation Report

For referring entities interested in additional insight into a professional's participation in a course, an Accomplishments, Impressions, and Recommendations (AIR) Letter can be provided upon request. This letter is designed to expand the referrer's understanding of the attendee's accomplishments of course objectives through their course work, offer individualized faculty impressions of the attendee's participation and interactions during the course, as well as include faculty recommendations, if any, for continuing education, assessments, therapy, or any other resources that they may see as providing opportunities for growth and enhanced remediation.

Requests for AIR Letters should be made in writing in the referral documentation. [Click here to learn more.](#)

## Content Timeline

### Overview:

The course begins each day at 8:30 AM and concludes each day at 4:30 PM. Lunch and break times may vary as needed. Please make arrangements accordingly.

- Pre-course Assignments: Three (3) hours of pre-course record review, reading, and written assignments submitted prior to the course
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### Day One

8:30 AM to 9:00 AM

#### Introduction

- Check-in and confidentiality
- Review of ACCME protocols and UCI CME accreditation
- Faculty financial disclosure and introduction
- Defining the objective and goals for the course

9:00 AM to 10:30 AM

#### Participant sharing and introduction

- Participants' stories
- Identifying participants' course goals

#### Introduction to the PBI Formula© and the Four Laws

- The PBI Formula©: A conceptual framework for exploring personal risk factors and vulnerabilities in terms of record keeping practices
- The Four Laws: Practical tools to promote excellent record keeping habits moving forward

#### The purpose of the medical record

- Understanding medical records
- Identifying and understanding regulations regarding medical records
- Defining and exploring SOAP
- Contemporaneous records and what that means
- Strategies for keeping contemporaneous records
- Case studies and individual medical record review
- Health Care Finance Administration (HCFA) guidelines

10:30 AM to 10:45 AM

#### Break

10:45 AM to 12:00 PM

#### Legibility of records

- Strategies for keeping legible records
- Case studies

## Defining complete medical records for documentation of service

- Principles and identification tools for complete records
- Critical principles of medical justification and documenting justification
- Review of systems
- Case studies

12:00 PM to 12:30 PM

Lunch

12:30 PM to 3:00 PM

## Histories, exams, and labs

- History of present illness
- Relevant histories
- Keys and pitfalls when documenting physical exams
- Documenting labs, diagnostics, consultations

## Communication and consent

- Documenting follow-up, patient communication, patient education
- Role of communication policies
- Informed consent
- Case studies

3:00 PM to 3:15 PM

Break

3:15 PM to 4:30 PM

## Chaperones, special requests, and treatment plans

- Chaperones and the documentation of chaperones, family, friends, and staff
- Past medical records and requests for past medical records
- Treatment progress and treatment plans
- Non-compliance
- Case studies

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## Day Two

8:30 AM to 10:30 AM

## Corrections and amendments, prescriptions, and EMR

- Documentation of prescriptions and samples
- Correcting and amending medical records
- Documentation by clinical and non-clinical staff
- Pitfalls of EMRs and strategies to help
- Case studies

10:30 AM to 10:45 AM

Break

10:45 AM to 12:00 PM

Controlled substances and compliance

- Exploring rules and regulations regarding controlled substances and chronic pain
- Documenting do's and don'ts for controlled substances
- Keys to documenting functionality and sound clinical judgment
- Controlled substance agreements
- Case studies

12:00 PM to 12:30 PM

Lunch

12:30 PM to 3:00 PM

Controlled substances and compliance cont'd.

- Drug testing and documentation
- Documentation of checking the prescription monitoring program
- Saying "no" and documenting those decisions
- Limiting care or terminating care of patients, with proper documentation
- Case studies

Patient education, informed consent, and HIPAA

- How to document patient education
- Do's and don'ts of informed consent
- Keys to understanding HIPAA and appropriate documentation

3:00 PM to 3:15 PM

Break

3:15 PM to 4:30 PM

Personalized Protection Plans©

- Individual personalized review and critique of pre-course medical record submissions
- Integrating course material, lessons learned from pre-course record submission review and critique, and discussion into the creation of a Personalized Protection Plan©
- Final Exam – Oral presentation of the Personalized Protection Plan© with peer-review from classmates and feedback from faculty

## Extended Edition — Post-Course Follow-Up

### Extended Edition Overview:

The PBI Medical Record Keeping Course, Extended Edition, includes a longitudinal follow-up component for increased accountability and extended learning. Upon completion of the live portion of the course, participants enrolled in the Extended Edition attend a total of 12 Maintenance and Accountability Seminars. These seminars focus on implementation into practice of the Personalized Protection Plan®, developed in the live course. Through continuous, real-time faculty feedback and peer review, participants' potential for relapse is minimized. [PBI Maintenance and Accountability Seminars](#) consist of weekly, one-hour, faculty-led group teleconference seminars.

The PBI Medical Record Keeping Course, Extended Edition confers a total of 30 CME Credit Hours (17 for the live course + 13 for post-course follow-up component).

### Extended Course Timeline:

1. Upon completion of the live course, Extended Edition participants will read a reading packet to prepare them for the follow-up course and submit their Personalized Protection Plan® for faculty review.
2. Extended Edition participants will then select their preferred cohort and begin participation in Maintenance and Accountability Seminars one hour weekly for a total of 12 seminars. Cohorts are scheduled on weekday evenings and are subject to availability. This portion of the course takes approximately 12-14 weeks to complete.
3. Extended Edition participants receive a completion certificate upon finishing the live course and a second completion certificate upon finishing the extended component.

## Accreditation Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the University of California, Irvine School of Medicine and Professional Boundaries, Inc. The University of California, Irvine School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

## Designation Statement

The University of California, Irvine School of Medicine designates these live activities for a maximum of 30 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

## Disclosure Policy

It is the policy of the University of California, Irvine School of Medicine and the University of California CME Consortium to ensure balance, independence, objectivity and scientific rigor in all CME activities. Full disclosure of conflicts and conflict resolutions will be made prior to the activity in writing via handout materials, insert, or syllabus.

## California Assembly Bill 1195 and 241

This activity is in compliance with California Assembly Bill 1195 and 241, which require CME activities with patient care components to include curriculum in the subjects of cultural and linguistic competency & implicit bias. It is the intent of AB 1195 and AB 241 to encourage physicians and surgeons, CME providers in the State of California, and the Accreditation Council for Continuing Medical Education to meet the cultural and linguistic concerns of a diverse patient population and reduce health disparities through appropriate professional development. Please see the CME website, [www.meded.uci.edu/cme](http://www.meded.uci.edu/cme), for AB 1195 and AB 241 resources.