School	Does your school/hospital system provide medical students with remote access to electronic medical records?	Are there restrictions on who gets access, where students can access info, what info is shared, etc?	How long have med students at your program had remote access to patient info?	How were students at your program given access? Were there challenges or roadblocks for your student leadership?	What is the impact of remote access on your medical school experience?
University of Pennsylvania	Yes, we get access to all of the Citrix applications like Epic, Eclypsis, Centricity, Emtrac, etc. We have to call the help desk to get access to the "extranet" for basic access. If we want VPN access we have to make a special request. VPN makes it a bit easier and allows you to access shared drives at the hospital. The SOM registrar needs to cosign these IT requests.		Not sure.	I had to proactively request remote access for myself and have it signed off by an administrator. They don't necessarily encourage everyone to do it, but it's possible if you ask.	"I certainly enjoy and appreciate the access at home. I can finish my Epic charts at home at 2am, I can look up that lab result I've been waiting for all day and night, and I can read up on my patients for the next morning, etc....so I find it highly valuable."
Duke	All students associated with clinical services get access. Information can be accessed from any computer with an internet connection and an ability to create a VPN connection.	Access is identical to access afforded at hospital computer stations - no information is restricted.	For at least the last two years and presumably much longer.	It's a given. No challenges or roadblocks to the knowledge of current students. Our Tech guys regulate access.	"Substantial. Monitor patient's progress from home. Get a sense of changes to the schedule early and read up on patients before arriving at the hospital. Work on H&Ps from home. Also allows me to work remotely - elsewhere in the hospital - should I desire. "
University of Pittsburgh	Yes. All third- and fourth-year med students are eligible for it after doing some quick paperwork.	I believe we have access to all the same things as physicians.	Last year was the first year we had it.		"It's really, really helpful to have. If a note is not time-sensitive and you have to leave the hospital at a certain time, then you can finish the note from home. You can also check in on your patients before you go to bed and therefore will have less to catch up on in the morning. And recently, when I was writing a case-report abstract on a patient I followed during my medicine rotation last March, I could review his records from anywhere rather than having to sit at a clinical work station or print out a few dozen pages."

Wake Forest University	Yes.	Med students get the same remote access as physicians at our hospital (both attendings and residents) through our hospital's web portal. So, we can access our EMR from anywhere with internet access.	I assume as long as residents and attendings have had remote access, but I am not sure about this.	Med students are treated as residents in this regard, so there wasn't much issue with med students being given access.	"It's been great. I am able to access patient charts from home, so often times I could find out what happened with my patients the night before while I'm at home drinking coffee. All the med students utilize it in some way. There are little security issues with it as well since we have to go through a portal every time to use it (so if someone's computer gets stolen, the EMR is not available on that computer unless you logon through the web portal). "
University of Utah	Yes, we can access EMRs from home at any time. All medical students have access.	We have access to all information.	I'm not sure how long we have had access, but it's been a while.		"It's an extremely helpful resource to have! It makes working from home much easier, obviously, as well as complementing learning as ==charts and information are constantly easily accessible for preparation of presentations==."
SUI-SOM	All 3rd and 4th year students have access.	I can access the same information from home that any clinician can. There are no restrictions other than the restrictions that apply to any medical student accessing the system. We cannot access the operating room schedules. The system records the charts that we view and we are occasionally audited.	I'm not sure on this one, for at least the past 1 or 2 years.	We have access by downloading the citrix application to our PCs. I am not aware of any roadblocks that were encountered in granting students remote access. I don't see the problem with letting students have access because we are bound by HIPPA to keep it private no matter where we get it.	I personally have found it to be very beneficial to my experience. I'm able to check the vitals or significant events for my patients before even stepping foot into the hospital. It ==helps me to prioritize which patient's I should see first==, how long I'll need with each patient, and when I need to come in. It also lets me know if my patient was truly discharged, or if something got in the way and they ended up staying after we set up the discharge. However it is ==nice to be able to check labs you ordered late in the day from home that night.==
University of Kansas	All 3rd yr medical students receive remote access via the laptops we were required to buy at the beginning of medical school. We have tech support help us download the appropriate software on the laptops and are given access at 3rd yr orientation.	With access we are able to gain complete access to the hospital's EMR and look up patients.	We have had information for about 3 yrs I think		It is a key component to our 3rd year clerkships. Most students who are on inpatient service use the access at home daily. It allows for students to get the maximum experience, as we are able to read about pts and follow imaging and labs after we leave the hospital. Students are also allowed to follow up on pts with pts' approval

University of Chicago	Yes. The medical center has given us a login through a Citrix Access Platform that grants access to EPIC as well as the med center's server for remote access to secure hard drives. Citrix is also how students have home access to up-to-date and pubmed.	EPIC contains all labs, links to PACS images, operative reports, path reports, clinic notes, ER notes, and labs. The only information not on EPIC is admission notes which are still paper-based in our institution.	Since we fully adopted EPIC, which was around 3 years ago.		
Eastern Virginia	We use Epic Ecare at our primary teaching hospitals. All medical students who have completed the online training course can request and receive access. Typically, only the M3+ individuals do the training but in theory, an M1 can do it as well.	In our outpatient clinics, we use All Scripts and students have read only access. W/ both Epic and All Scripts, we have access to everything in the system. We cannot sign orders; we can only pend them for our interns/residents/attendings although we typically don't because it's complicated to sign pended orders. When we preround, we write our own notes and our intern/resident cosigns it and puts an addendum on it. Our attending then cosigns that note w/ an addendum.	We've had access as long as it's been around at our hospitals... more than 2 years now?	There weren't any challenges I am aware of. The hospital groups we are partnered w/ understand the necessity to have student access the EMR. We complete the same training that the MDs have to undergo to get access.	"Remote access is great! We can monitor our patients from home, see if our pt is still around so we can know whether we need to preround at all, ==we can see how our day is going to be before we get in==, we can even get started on writing the note before we get to the hospital facilitating the speed of prerounding, we can access the EMR through our iPhones and iPads making it easier to round and pick up lab values, reduce the traffic on the number of people using the computers on the wards...
Loyola	Yes.	No, just must abide by HIPPA.	At least 3 years.		"AWESOME!! Reduced rounding time, plus check on pts when at home"
Southern Illinois University		Students have limited access to patient charts in the fact that they cannot make any changes or alterations to any info in the chart and do not have access to all documentation. However, they have no restrictions on reviewing vital signs, orders, and medications of each patient. Students can have access from any computer as long as that computer has downloaded the supported software content with the appropriate permission. The med student still needs a username and password to access the info.	Medical students have had remote access since the hospitals went electronic in late 2008.	Students did not have any problems getting remote access. Remote access was given as soon as students were allowed hospital access to the computer systems.	Remote access ==provides students with a better understanding of how their patients' conditions improve or worsens when they are not physically in the hospital==. I am not sure how many students take advantage of the remote access, but it does provide a good understanding of the status of the patient when the student comes to the hospital in the morning.
University of Miami	Yes our school does have at home access to the EMR for our	There are no restrictions on who gets access, anyone who has completed the training to access the	I'm not sure when it started; I think shortly	The transition has been lead by the hospital department	Allowing us to check vitals and get labs before we come into the hospital helps us not violate hours restrictions (students

University of Miami, cont.	main hospital. We do not have it at our private hospital or at our VA. Our main (county) hospital is only partially EMR, old notes from previous visits, current labs, diagnostic imaging, and vitals are all available for patients on the floor. However, progress notes and consults for the current admission, orders that have been written but not yet carried out (entered by the secretary), or ANY information for ICU/step-down unit/trauma patients is on paper.	computer system while in the hospital can access it at home through a proxy. All of our course material for medical school, any library books or journals online, and the hospital EMR are all accessed via a proxy. Students are fingerprinted and background checked during the admission process. We cannot enter notes or access "sensitive information" such as HIV status for patients. This hasn't been an issue since all of our progress notes are handwritten. Some of the rotations are starting to switch over to computer based notes (Pediatrics) and lets students enter a note which gets a special color designation as a student note and another color designation indicating when it has been reviewed and co-signed by a resident or attending.	after we began EMR you could access it from home (more than 4 years ago). It has been discussed for our private hospital which just began a new method of EMR, but it is policy not to allow anyone (employees or students) access from home for the VA.	and has not required student leadership.	aren't allowed to come in before 6AM, but rounds start at 6 so it's hard to pre-round unless we get started at home).
University of Kentucky	Yes. We have to apply for access through IT.			Usually, we have to show a need for access. It is much easier to get access for research or services that have home call. We also have rotations at the local VA clinic, which we can't get remote access and beyond the control of the university. If access is granted, they walk you through setting it up on your personal technology.	
Creighton	Partial.	We only have access to our "Lara" system which is patient vitals and labs, but no more.			
UVM	UVM does provide all students with access to our EMR system,	The gateways have to be set up on individual computers through a verification process with our	We've had access since June 2009,		I do appreciate having remote access. On several occasions I was able to base my pre-rounding times on the active census,

UVM, cont.	Prism, from home through the same gateway all physicians access patient records from home.	information systems team. I'm unaware of any limit to the number of gateways that can be set up per person, but I have a feeling one does exist. The gateways provide access to full files and allow us to write/edit notes from home as well, though this is strongly discouraged.	when Prism was started at Fletcher Allen (the hospital system here in Burlington). As far as I know students are given most of the same EMR access privileges as MDs, though setting up remote access was not formally publicized to students during our orientation.		check on overnight events and review OR schedules, etc. Most students feel the same way, I think.
University of Iowa	Any employee has off site access to EPIC, the EMR. We have a website with remote links to hospital programs. From here we log on to the website and then again onto the EMR program the same as we would at the hospital. It works great!				
University of Vermont	Yes.	No.	Since just after we got an EMR, about 1.5 years ago.	I was simply forwarded a link to the online access tool and this has been perpetuated among students at our institution. The faculty is aware that we have access and there has never been a dispute over safety.	**1.** Ability to read up on patients to have surgery the night before from the comfort of my home in order to be prepared for the cases the next day. **2.** After long nights on call, if notes were not completely finished, the chief resident would not infrequently suggest that I go home and finish them there instead of being tethered to the hospital where there are so many interruptions. **3.** When preparing projects or presentations on patients I was able to look up important data from home or the library instead of having to trek to the hospital, find a vacant computer and either print off, sensitive info or spend hours consuming precious computer space when clinical faculty are needing to chart.