



Ethics & Compliance Department

Policy No.: 313

Created: 01/2000

Reviewed: 06/2026

Revised: 08/2020

USE OF SCRIBES

SCOPE

Applies to all Envision clinicians providing medical services. For purposes of this policy, all references to "clinician" include temporary, part-time and full-time employees, independent contractors, officers and directors.

PURPOSE

Envision Healthcare Operating, Inc. and its subsidiaries and affiliates ("Envision" or "the Company") has adopted this Use of Scribes Policy to set forth documentation guidelines for scribe documentation.

POLICY

This policy outlines the use of scribes who, in their assigned roles, may be responsible for recording information in the patient record.

Traditional Scribes

A traditional scribe's line of responsibility is limited to being a documentation technician. Their duties are limited to accompanying a clinician during patient care services in order to transcribe a history during the clinician's interview with the patient. A traditional scribe records the physical examination or procedures as they are rendered by the clinician and orders any diagnostic tests as the clinician explains them to the patient. The scribe may also record test results, diagnostic impressions, prescriptions and family discussions or follow-up instructions in accordance with recommendations and practice design of the clinician to whom he/she serves. A traditional scribe is not licensed to perform patient care activities and does not act independently.

Artificial Intelligence ("AI") Assisted Scribes ("AI Scribes")

AI-assisted scribe technologies ("AI Scribes") may be used to assist clinicians in generating clinical documentation, subject to the following requirements:

- AI Scribes are technology-enabled tools that may capture audio and/or text inputs



Ethics & Compliance Department

Policy No.: 313

Created: 01/2000

Reviewed: 06/2026

Revised: 08/2020

during a patient encounter and generate draft clinical documentation for clinician review.

- The treating clinician maintains full responsibility for all documentation generated with AI assistance.
- The clinician must review, edit as necessary, and authenticate all AI-generated entries prior to finalization. A clinician's signature affirms that the documentation accurately reflects the services rendered.
 - AI Scribes do not independently make clinical decisions or perform patient care activities.
 - AI-generated content must not be relied upon without clinician validation.
- Patients should be informed of the use of AI-assisted documentation in accordance with applicable laws, Company and hospital facility policies.
- AI tools must comply with HIPAA Privacy and Security Rule requirements.
- AI-generated drafts, recordings, or transcripts must be handled in a way consistent with Company data retention and security policies.

Documentation Requirements

When Traditional Scribes or AI Scribes are used by a clinician in documenting medical record entries (e.g., progress notes), the scribe is not required to sign/date the documentation. The treating clinician's signature on a note affirms that the note adequately documents the care provided.

Documentation of scribed services must clearly indicate:

- Who performed the service;
- Signature/authentication, dated by the performing clinician.

All departments and individuals shall comply with the Company's coding and billing policies, and interpretations different from or actions inconsistent with this policy are prohibited.

POLICY REVIEW

The Ethics & Compliance Department will review and update this Policy, when necessary, in the normal course of its review of the Company's Ethics & Compliance Program.