



***Connecting HealthCare Providers,  
Institutions, Consortiums and Students for  
Superior Workforce Development***

## **Frequently Asked Questions**



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## TECHNOLOGY

### **What type of architecture is myClinicalExchange?**

*myClinicalExchange is deployed as a web based hosted solution.*

### **Does myClinicalExchange interface with any other systems?**

*myClinicalExchange.com does not interact with any other system. All data in myClinicalExchange.com are entered by appropriate parties involved.*

### **What Technologies were used to build this app?**

*Microsoft Stack of technologies including ASP.NET, SQL Server, Reporting Services.*

## DATA HOSTING AND SECURITY

### **How does myClinicalExchange work with sensitive hospital data?**

*myClinicalExchange.com does not house any sensitive or competitive data of Hospitals in the system. The system brings in independent relationships that are autonomous subscribing entities of myClinicalExchange. The University/students information that resides such as name and email are the only private pieces of information.*

### **Who owns the data within myClinicalExchange?**

*The Hospital and the Students are the owners of the data-Hospital and Clinical Rotation information and Student information respectively. Our user agreement is explicit in that all of the data is proprietary and confidential property. . If for some reason, our relationship is terminated, the Hospital can download the information via reports.*

### **How do backups and maintenance occur?**

*We perform upgrades and backups on a periodic basis. These are typically scheduled on weekends when there are a low number of users logged into the system to avoid any disruption of use or downtime.*

### **How do I know if my data is secure?**

*Myclinicaexchange.com embraces Industry Standard Security implementation at application; server and hosting facility levels typically used by companies those who do millions of data transactions. Our hosting facility, Operating system vendor and our hosting application follows necessary industry standard security protocol recommendations as defined in the guide lines of NIST (National Institute of Standards and Technology).*

*Myclinicaexchange.com is secured using 128 bit encryption SSL certificate to protect data in the internet network which is a stringent industry standard network protection system used by millions of websites. The application implements a security authentication where user login and password will be validated against the encrypted*



values stored in the database. We also ensure that the dataflow between pages implement both web server based session and 128 bit encrypted query strings using custom encryption logic.

## DATA AND REPORTING

### **What type of data is required to generate the reports?**

*myClinicalExchange collects a number of different types of data. This includes but is not limited to, attendance of students, details on units/floors/facilities of each clinical rotation, preceptor and student evaluations and more. The users can determine which reports would be most beneficial to the organization. myClinicalExchange enables our customers to have the ability to run a report at their discretion rather than try and “create” the data after the fact.*

### **What type of file formats can we export our reports into? What if I want to format the data into a pie chart or a bar graph?**

*myClinicalExchange allows all reports to be downloaded into all the common formats including XLS, PDF, CSV. Once you have downloaded the information, you are free to manipulate the data in your preferred presentation style.*

### **What type of file formats does our compliance documents need to be in for us to store this information?**

*myClinicalExchange can also be used as a repository for all Compliance documents such as affiliation agreements between hospitals and universities and more. These documents can be in any format and are uploaded to the system. The users are then prompted to associate additional details to these documents such as an expiration date so that a hospital can manage the Compliance and Risk around all clinical rotations.*

## TECHNICAL SUPPORT

### **What type of Support do you offer?**

*You may contact our Technical Support team using our ticketing system, by phone, or by email to initiate a support ticket. Our standard hours are 8:00 AM to 5:00 PM MST Monday to Friday. Our support team is also on call 24x7x365 and will respond to support tickets after hours when needed, for emergency issues.*



## USING MYCLINICALEXCHANGE

**Does every type of user have to input information into the system? I do not want success to be hindered if someone chooses not to document something in the system?**

*The system has many functions; however, the hospital can choose to use certain functions and not others. For example, if they do not want to maintain compliance data (to be filled by Universities/Colleges) they can opt out of it. However, when you have a manual system, you still end-up documenting who, where and when. This functionality can be utilized in the product, by simplifying the data entry of the “who” to University and when-where to the hospital coordinator. It simplifies all communications to the Universities as it is instantly available for the University to see the status and when-and-where without the user having to make a phone call or email. Also, the system notifies the student of their schedule and documentation required without a hospital Educational coordinator having to lift a finger.*

**The students' clearance documentation feature is very nice, but how do I work with Universities that have their own forms or if students bring their own documentation to me?**

*The hospital can decide to use this function or not. University can input the data, if they are required by the hospital. A student does not have access to input the data. There are some hospitals where the compliance is stringent and to mitigate the risk, the educational coordinator is the only one who can validate all the compliances are met by each and every student.*

**How do I decide the number of students I will have on what floors on what days before I decide who to accept or deny? Will the nurse managers have this information as well?**

*Our design allows the User to visually see both openings/Capacity and currently scheduled students by Unit/Floor. The visual calendar is designed to look like a Microsoft Outlook calendar view. Nurse Managers are emailed this information and they can log into the system to view it as well.*

**What exactly is the process for submitting clinical requests, approving them, reproposing to the schools for different days or shifts? Will I get an email generated to me when the schools send a proposed request?**

*An Academic Institution (Universities,Colleges) user can input their request; hospital coordinator can review, approve, change, deny or modify a request to suit their capacity/openings that they have. Hence, you eliminate keeping track of all requests and balance it with your opening/capacity limits. Alternatively, an Education Coordinator at a hospital can create a request on behalf of an Academic Institution or directly create a “Rotation” with by skipping the explicit Request/Approval.*

*The system currently has the ability to send an email notification to the hospital coordinator when a request is submitted by the university. This feature can be*



*configured to send the notification immediately or combine all requests and send one email nightly.*

**How far in advance do I have to post clinical availability? Projecting more than a semester at a time has proven problematic in the past, due to low census, staff turnover and our own internship demands for clinical spaces.**

*The hospital has full control over when they can have their openings/capacity defined – yearly, by semester or monthly or just on-time, to suit their unique needs.*

**Are preceptors additional “users” of the system?**

*myClinicalExchange users are only the people who are responsible for Request/Approval, Creation of Rotation, Manages Affiliate Agreement or viewing reports for the Hospital and Academic Institution. The preceptors are not considered users since they are responsible for view/read only information such as orientation information and finalized clinical rotation schedules.*

