



Guideline: Use of Large Language Models (LLMs) in Clinical Documentation – MD Undergraduate Program

Effective Date: approved at UGMEC: 19 January 2026

Applies To: All clinical encounters in Years 1-4

Guideline Requirement

Students must independently generate all written clinical documentation. Large Language Models (LLMs) or other generative AI tools may not be used to draft, edit, summarize, or rewrite case notes or proposed management plans. This guideline does not address use of AI Scribe, which is currently under review.

Prohibited Activities

- Never use LLMs to generate, write or rewrite patient histories, admission notes, consults, daily notes, assessments, or discharge summaries.
- Do not use LLMs to initially generate clinical reasoning activities, such as differential diagnoses, investigations, or treatment recommendations, without guidance from your preceptor.
- Never enter any patient-identifiable information into an AI platform.
- Never use LLMs to generate workplace-based assessments (WBAs).
- Never submit documentation that they cannot defend verbally to a supervisor.

Professional Expectations

Clinical documentation must represent the student's own clinical reasoning, written communication, and professional judgment. Any violation of this requirement will be treated as both an academic integrity breach and a lapse in professionalism and will be managed in accordance with UBC's academic integrity procedures and /or the [UGME Professionalism Guideline](#).

Permitted Uses (Outside Documentation)

Students may use LLMs for high-level study support only (e.g., reviewing textbook-level summaries), provided that no clinical cases, identifiers, or assessment materials are used.

Accountability

Students are fully responsible for the accuracy, safety, and originality of their written content. "AI assistance" is not an acceptable defense for errors or omissions.

Review

This guideline will be reviewed annually in alignment with UGME assessment and professionalism requirements until a policy is developed.



Disclosure:

Generative AI was used in the initial draft of this Guideline.

Examples of Prohibited vs. Acceptable Uses

Prohibited (Academic Misconduct / Professionalism Breach)

- Typing a patient case history into an LLM and asking it to write the note.
- Asking an LLM to improve the grammar, structure, or clarity of a clinical note.
- Asking “What investigations should I order for this patient?” based on the patient's case details.
- Producing a discharge summary with AI wording and submitting it as your own.
- Entering symptoms with demographics and hospital location into an AI platform.
- Students must not copy AI-generated text into any document representing clinical judgment.

Acceptable (Within Limits)

- Reviewing general medical knowledge without patient information, with appropriate precautions, to ensure the accuracy and validity of information.
- Using AI for non-clinical personal writing unrelated to assessment.
- General academic writing support for coursework not involving clinical documentation.
- Reading standard clinical guidelines from authoritative sources (not generated summaries).

Grey-Zones

- Use of Open Evidence as a resource to enhance and confirm clinical reasoning in Year 4.
- When in doubt, students must ask their Course Director, Site Director or Clerkship director.