MEMORANDUM OF UNDERSTANDING

BY AND BETWEEN <u>Vanderbilt University Medical Center</u>

		AND			
Med	ical Center ar	nd	with respect to the	etween Vanderbilt University e services of fo	
		function as		This role is	
of as	ssigned patie rd, may round	nts only, is autho	rized to collect and and intentional intention in collect and make provision	access to the medical record alyze data from the medica ans for throughput, discharge	
			derstanding will beconnerfect for two (2) years	me effective on or abou	
the s prov	service, this a ides the othe	greement can ren	ew for a further twelve (f its intention not to ren	ent upon ongoing viability of 12) months unless one party ew at least ninety (90) days	
3.	The	(role or nam	ne) is an employee of		
4.	Responsibility for the annual competency evaluation rests with (name of the employer.)				
5.	Final authority for determination of the working schedule rests with(name of employer.)				
6.	(employee or employer) is responsible for providing liability coverage.				
7.	is granted restricted access to the electronic medical record and may not enter orders or document in the medical record.				
8.	patients un	is granted phy der the care of XX		d areas like thefloor	

Template LNCC Memorandum Of Understanding

In recognition of this agreement, the parties herewith sign this Mountain Understanding.	emorandum of
Name and title- For Vanderbilt University Medical Center	Date
Name and title- For Employee Organization (entity representative)	Date
Name and title- Supervising Physician	Date
Name and title- Credentialed Nurse	 Date