

# Three Rivers Hospital

<b>DEPARTMENT:</b> Facility Wide	<i>Page 1 of 3</i>	<u>Effective Date:</u>	<b>REVIEWED</b>	
		<u>Approval Date:</u>	<b>Date</b>	<b>Initials</b>
<b>SUBJECT:</b>  Admission of a Patient	Medical Director	Date		
	Director of Patient Care	Date		
	Chief Executive Officer	Date		

**POLICY:**

Receive the patient/family/caregiver into the system in such a manner that he/she feels welcome and secure while comfort, safety, biopsychosocial, cultural, financial and spiritual needs are addressed; and obtain the key information identified below to process the patient admission.

Three Rivers Hospital does not exclude or deny admission to any person on the basis of race, color, creed, religion, gender, age, disability status, national origin, sexual orientation, and marital status, ability to pay for services or any other illegal basis. All patients will be accepted for care and housed without discrimination.

**PROCEDURE:**

- I. All Members of the medical staff with active or who have temporary admitting privileges, in accordance with the Bylaws of the Medical Staff, may admit patients.
  - A. All patient admission must be accompanied by appropriate orders called, faxed or sent to the appropriate unit. These orders should include but are not limited to:
    1. Admission Status (inpatient, ambulatory, observation for)
    2. Admitting Diagnosis
    3. Attending Physician
    4. Vital sign parameters
    5. Allergies/Reactions
    6. Diet orders
    7. Activity orders
    8. Lab and Imaging orders
    9. Medications and IVs to be administered during hospital stay, including Medication Reconciliation of home medications. The written and/or faxed order must include complete list of medications to be administered during hospital stay.
    10. Procedure/Treatments
    11. Resuscitation status as appropriate

- B. The admitting Medical Provider will:
  - 1. Determine patient admission needs
  - 2. Coordinate care between the patient's primary care provider and Specialists providing care to the patient
  - 3. Access appropriate care site for admission
  - 4. Provide orders appropriate to patient care needs
  - 5. Assess patient at the bedside within timeframe outlined by Medical Staff Bylaws. Specify reasons for admission or treatment.
  - 6. Determine diagnosis or diagnostic impression
  - 7. Identify goals of treatment and treatment plan
  - 8. Counsel patient about risks, benefits and alternatives of surgery and/or procedures and obtain informed consent as indicated
  - 9. Complete the patient's History and Physical (H&P) as outlined by Medical Staff Bylaws.
  - 10. Initiate appropriate discharge plan as indicated

II. Patient Registration Representative will:

- A. Provide the standard inpatient admission packet for inpatients and surgical/procedure patients and will create and maintain a supply of standardized admission packets for use.
- B. Upon notification, register the patient, generate the Face Sheet and ID Band, document labels, and assure delivery to the patient location.
- C. The Patient Registration Representative is responsible for obtaining remaining information and signatures on required forms at the time of registration.
- D. The Conditions of Admissions Form, HIPAA, Patient Bill of Rights and the Medicare Message handed to the patient for review.
- E. If the patient cannot read English, interpreter services should be sought and translated forms will be provided.
- F. After reviewing the form, any question the patient may have should be answered.
- G. When all the patient's questions have been answered, have the patient sign and date each of the forms on the eSignature pad.
- H. The Patient Registration Representative shall then sign as a witness to the patient's signature.
- I. If the patient wishes to request financial assistance or charity care:
  - 1. Patient given information to contact the Financial Counselor or the Access Manager.
  - 2. If the patient was admitted, the Patient Access personnel will refer the in-house Financial Counselor to the patient's room, so a bedside conversation can occur regarding financial assistance.
- J. If the patient is an adult and does not have an Health Care Directive or wishes additional information:
  - 1. The Health Care Directive form is given to the patient and this is documented on the form.
- K. For every patient who has Medicare or a Managed Medicare as any insurance, primary, secondary, or tertiary, regardless of age:
  - 1. The "An Important Message from Medicare" Form must be reviewed with the patient.
  - 2. If the patient cannot read English, a translated form will be provided or interpreter services sought.
  - 3. After reviewing the forms, any question the patient may have should be answered.
  - 4. When all patients' questions have been answered, have the patient sign and date the form on the eSignature pad.
  - 5. Provide the patient with a copy of the signed document.

### III. Procedure for Admission to Clinical Care Area:

#### A. Obtaining a Bed Assignment:

1. The admitting patient care staff will be notified of pending admission and bed assignment.

#### B. Clerical support responsibilities:

1. Transcribe physician orders
2. Compile chart

#### C. The RN:

1. Obtains report of patient condition and receives patient into appropriate care area
2. Identifies and prioritized appropriate patient care needs
3. Obtains physician orders as needed
  - a. Medication orders received from the physician as “meds per home routine” or any other non-specific fashion will not be administered
  - b. Medication orders must meet Three Rivers Hospital standards prior to medication administration
  - c. The RN ensures that the orders are accurately acknowledged, transcribed, and implemented.
4. Completes the nursing admission record and verifies that all appropriate admission data are collected and documented
5. Ensures that the Advance Directive information has been obtained and documents the content of the advanced directive in the patient’s record if known.
6. Assures that identification bands are placed with appropriate information included
7. Educated adult admissions on the pneumococcal/influenza vaccine
8. The care team initiates a plan of care/clinical pathway