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Owner Ty Witt: Chief Medical Officer (CMO)
Policy Area Access to Care Policies

Admission of a Patient*

PURPOSE

- I. To receive the patient into the hospital in such a manner that they feel welcome and secure while comfort, safety, biopsychosocial, cultural, financial and spiritual needs are addressed.
- II. To obtain the key information identified below to process the patient admission.
- III. 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.

SCOPE

- I. This policy applies to all Three Rivers Hospital staff involved with the patient admitting process.

RESPONSIBILITIES

- I. The Patient Registration Manager and nursing administration are responsible for ensuring compliance with this policy.
- II. ***ACTION REQUIRED*** If this policy is updated or changed, the revised version must be forwarded to the Department of Health and posted on our website.

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).
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 time frame 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. The 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. Obtain remaining information and signatures on required forms at the time of registration.

- D. Provide the patient with Conditions of Admissions Form, Notice of Privacy Practices, Patient Rights and the Medicare Message for review.
- E. Seek interpreter services for patients who cannot read English and provide translated forms.
- F. Answer any questions the patient may have after reviewing the form.
- G. Have the patient sign and date each of the forms on the eSignature pad after all questions have been answered.
- H. 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.
 - 2. If the patient was admitted, 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 Advance Directive, end of life health care directive or wishes for additional information:
 - 1. The Advance Directive, Health Care Directive form is given to the patient and this is documented on the form.
- K. Medicare Notices.
 - 1. For every patient who has Medicare or a Managed Medicare as any insurance, primary, secondary, or tertiary, regardless of age:
 - 2. The "An Important Message from Medicare" form must be reviewed with the patient.
 - 3. If the patient cannot read English, a translated form will be provided or interpreter services sought.
 - 4. After reviewing the forms, any question the patient may have should be answered.
 - 5. When all patients' questions have been answered, have the patient sign and date the form on the eSignature pad.
 - 6. 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 prioritizes 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 admissions data is 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. Educates adult patients on the pneumococcal/influenza vaccine.
8. Works with rest of care team to initiate a plan of care/clinical pathway.

REFERENCES

42 CFR §482.13 Conditions of Participation, Patient Rights.

42 CFR §423.128 Information on Advance Directives

45 CFR §164.520 Notice of Privacy Practices for Protected Health Information.

Approval Signatures

Step Description	Approver	Date
CEO	James Graham: Chief Executive Officer (CEO)	12/2022
Board of Commissioners	Leslie McNamara: Board Secretary	12/2022
Policy Committee	Shauna Field: Administrative Assistant	12/2022

CFO	Jennifer Munson: Chief Financial Officer	12/2022
HR	Anita Fisk: Director of Human Resources	11/2022