

<i>Title</i>	Admission Policy	<i>Policy No.</i>	225.3.229
<i>Department</i>	Patient Care	<i>Page No.</i>	1 of 3
<i>Approved By</i>	Director of Clinical Services	<i>Effective Date</i>	10/29/2018
<i>Last Review</i>	11/20/2019	<i>Next Review</i>	11/20/2020

## SCOPE

This policy applies to all PeaceHealth settings and services:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Cottage Grove Medical Center | <input checked="" type="checkbox"/> Peace Island Medical Center | <input type="checkbox"/> St. John Medical Center       |
| <input type="checkbox"/> Ketchikan Medical Center     | <input type="checkbox"/> Sacred Heart River Bend                | <input type="checkbox"/> St. Joseph Medical Center     |
| <input type="checkbox"/> Peace Harbor Medical Center  | <input type="checkbox"/> Sacred Heart University District       | <input type="checkbox"/> United General Medical Center |
| <input type="checkbox"/> PeaceHealth Medical Group    | <input type="checkbox"/> Southwest Medical Center               | <input type="checkbox"/> System Services Center        |
| <input type="checkbox"/> PeaceHealth at Home          | <input type="checkbox"/> PeaceHealth Labs                       | <input type="checkbox"/> Ketchikan Long Term Care      |

## PURPOSE

The purpose of this policy is to establish guidelines for admission of patients to Peace Island Medical Center.

## POLICY

### Admission:

1. The Patient Registration department has the responsibility to assure that each patient admitted has an order for admission from a member of the Medical Staff of the hospital, and that each patient has signed consent for admission and been screened for special needs assistance
2. No patient will be refused admission because of race, color, sex, religion, age, disability, national origin, sexual orientation, or ability to pay.
3. Direct admits will be accepted from 8am-6pm Monday through Friday after a conversation with the Emergency Department Physician.
4. The nurse will assure that age appropriate admission forms are reviewed with the patient and documented in the patient's electronic health record.
  - 4.1. Specific forms are as follows:
    - 4.1.1. Advanced Directives
    - 4.1.2. Notice of Privacy Practices
    - 4.1.3. An Important Message from Medicare About Your Rights
    - 4.1.4. How to Request a Review of the Notice of Noncoverage

- 4.1.5. Observation and Outpatient Services Information
- 4.1.6. POLST form
- 4.1.7. Patient Rights and Responsibilities
- 4.1.8. Questions about your PeaceHealth bill
- 4.1.9. Bridge assistance application (for patients who do not have insurance)
- 4.2. Each patient admitted to the hospital shall wear a hospital identification band.
5. Provider shall have available the following information to the ED Nurse Team Lead (NTL):
  - 5.1. Patient full name and date of birth
  - 5.2. Admitting physician
  - 5.3. Admitting diagnosis
  - 5.4. Is a telemetry monitor needed?
  - 5.5. Estimated time of arrival
  - 5.6. Admitting orders: IV, Lab, Xray, etc.
  - 5.7. Is isolation needed? Also notify if MRSA or VRE
6. ED NTL will assign bed number.
7. If on arrival the patient is not stable, they will present to the emergency department for a medical screening exam, treatment and determination of disposition.
  - 7.1. Quick registration process will be done at the bedside.
8. Admitting will identify and place identification band on patient, receive valuables and place in safe, upon arrival.
9. The patient will be admitted and oriented to the unit following the department's admission procedure.

**Requirements:**

1. Confirm patient admit orders and prepare room.
2. Give/Receive report.
3. Verify patient identification
4. Review and update patient's allergies and apply red allergy bracelet.
5. Verify code status and apply DNR band, if applicable.
6. Assess for fall risk.
7. Check patient's personal belongings and valuables.
8. Complete Medication Reconciliation
9. Patient Teaching to include but not limited to:
  - 9.1. Orient patient/family to room.
  - 9.2. Use of nurse call/intercom system.

- 9.3. Bed controls, TV, overbed light and phone.
  - 9.4. Room thermostat.
  - 9.5. Location of closet and bathroom
  - 9.6. Safety precautions specific to individual patient
  - 9.7. Visitation
  - 9.8. Location of visitor waiting areas
  - 9.9. Name of physician primarily responsible for patient's care during hospitalization  
(attending physician)
  - 9.10. Unit routine
10. Complete admission assessment and forms as appropriate.

**Equipment:**

1. Identification (ID) bracelet
2. Red Allergy bracelet charm, if applicable
3. Do Not Resuscitate (DNR) bracelet, if applicable
4. Fall risk yellow bracelet charm

**DEFINITIONS**

**Patient:** An individual receiving care at a PHD.

**HELP**

Further information may be obtained by contacting the Director of Clinical Services.

**RELATED MATERIAL**

DNV-GL Healthcare, DNV, 07-02-18.

**APPROVALS**

**Initial Approval:**

Director of Clinical Services approved on November 1, 2012

**Subsequent Review/Revision(s):**

Director of Clinical Services approved revision on November 24, 2014  
Manager of Clinical Operations reviewed on October 2, 2015  
Medical Executive Committee (MEC) reviewed on November 2014, August 12, 2016  
MEC approved revision on October 4, 2017  
PIMC Policy Committee approved on 10/25/2018; 11/20/2019  
Director of Clinical Services approved on 10/29/2018; 11/20/2019

*For a complete history of collaborations and approvals, please check Workflow History or contact your policy coordinator.*