Policy

1. A patient may be admitted to the hospital only by members of the Medical Staff. All practitioners will be governed by this admitting policy and the approved Bylaws of the Lincoln Hospital District #3 medical staff.
2. All patients admitted to Lincoln Hospital District #3 will be asked about the existence of an Advance Directive upon admit. Information will be provided to patients about Advanced Directives and end of life care per request.
3. Lincoln Hospital District #3 maintains methods to help patients understand their medical bills and to provide financial assistance up to and including Charity Care, where appropriate. Please see information contained within Admission Packet. Patient may request application upon request.
4. Lincoln Hospital District #3’s Notice of Privacy Practices is offered to all patients upon admission and is thereafter available upon request.
5. Each patient shall sign a Consent for Treatment, Promissory Note, and Authorization to Pay Medical and Surgical Benefits form prior to admission or treatment.
6. All patients admitted to Lincoln Hospital District #3 will be provided information about their rights and responsibilities as a patient. Please see information contained within Admission Packets.
7. Patients admitted on an emergency basis who do not have a private physician or who do not indicate a preference for a specific physician will be assigned to a member of medical staff on emergency duty the day of admission.
8. An active member of the medical staff will be responsible for the care and treatment of each patient in the hospital, for the prompt completeness and accuracy of the medical record, for necessary special instructions and for transmitting reports of the condition of the patient to the referring physician.
9. It shall be the responsibility of the attending practitioner to pre admits surgical patients within a reasonable length of time to complete all pre-surgical information, including financial arrangements.
10. Patients will be admitted to the hospital with a provisional diagnosis or a valid reason for admission. In the case of emergency, such information will be recorded as soon as possible after admission.
11. If any question as to the medical necessity of an admission should arise, a final decision will be made by the physician serving on the Utilization Review Committee, after
consultation with the attending physician or if one of the same then another privileged physician.

12. Physicians who admit patients are responsible to give such information as may be necessary to assure the protection of the patient from self harm and to assure the protection of others whenever his or her patient might be a source of danger from any cause.

13. For the protection of the patient, any patient known or suspected to have suicidal intent will be admitted or placed in Observation where observation is readily available. Contact will be made with the appropriate mental health facility for a referral and evaluation. The patient record will contain clear evidence that such referral was offered, whether or not the patient or patient’s representative elected to utilize the offer. The facility holds the right to request an evaluation of involuntary commitment when medically necessary.

14. The hospital will admit patients suffering from all types of diseases, except in cases where facilities and/or personnel are insufficient to provide adequate or proper care. Such determination is within the discretion of the medical staff.

15. Allied Health practitioners (i.e. Dentists, Podiatrists, ARNP and PAC) with appropriate clinical privileges may admit patients under the care of an active Medical Staff member. An active member of the Medical Staff will perform the admitting physical examination and history, and shall assume responsibility for the overall patient care throughout the hospital stay.