Admission of a Patient

Policy:
Every effort will be made to provide health care in the local facility. The lack of specialized equipment, medical and/or nursing personnel may make it necessary to transfer a patient to another facility. Age, sex, ethnic background, creed or ability to pay will not be a limiting factor. All patients will be admitted by a member of the active medical staff.

Scope:
Business Office–Admitting Staff, Emergency Department, Medical Staff, Nursing Staff

Responsibilities:
The Nursing Supervisor will determine room assignments in accordance with the patient's admitting diagnosis, acuity of illness and age. The Ward Clerk will make a chart, printing pertinent clinic records as needed; The Registered Nurse is to complete the nursing assessment and nursing care plan including the initiation of the discharge planning process; Nursing Staff will carry out the nursing measures and physician's orders. The Acute Care Manager ensures compliance.

Control:
Acute Care Manager, Director of Patient Care Services, Administrator, Board of Commissioners

Purpose:
A. To ensure the patient a courteous welcome to the hospital.
B. To help the patient make the transition from home to hospital.
C. To give the patient confidence and allay his/her fears.
D. To secure the safety of the patient and his/her belongings.
E. To reassure patient's relatives and friends as to his/her care.
F. To give equal consideration to patients of all races, creed, color, religion, national origin, sex, marital status, age, disability, sexual orientation or gender expression.
Procedure:

Equipment and Room Preparation:

A. Bed (fan fold the covers back).
B. Patient's gown or hospital gown.
C. Patient care kit.
D. Nursing care plan.
E. Envelope for valuables, if needed.
F. Blood pressure cuff and stethoscope, thermometer.
G. Scales.
H. Suction Equipment, oxygen supplies and IV Pump, if needed.
   I. Identification bracelet with patient's name, ID number, DOB and doctor's name.
J. Admission of new patients may be through the Business Office (Admitting) or Emergency Room.

Admission of a Patient:

A. Admission of new patients may be through the Business Office (Admitting) or Emergency Room.
B. Assignment of room will be made by the Nursing Supervisor.
C. Greet patient cheerfully; introduce yourself and other patient in the room. Make sure the admission paper is signed.
D. Help patient undress and put on hospital gown or own gown, as indicated by patient's condition and desire.
E. Admission and assessment is completed by the Registered Nurse as soon as possible and no later than two hours of admit time. The admission forms include: age/department appropriate History, age/department appropriate admission assessment, home medications with Medication Reconciliation, Allergies, and MRDO/Initial Profile. For patients admitted for Same Day Surgery the History Short Form may be used. For patients admitted for local procedures, transfusions or infusions the Fast Track Assessment may be used for the physical assessment.
F. Weigh all patients able to stand. If unable to stand, use bed scales or W/C scale. If not appropriate then ask approximate weight. Ask for height. Document on appropriate intervention.
G. Make patient comfortable in bed. Explain use of call system, side rails, telephone, and location of bathroom and light switches.
H. Take patient's temperature, pulse, respiratory rate, blood pressure and oxygen saturation (for baseline).
I. If patient not already wearing an identification bracelet, fasten patient identification and allergy band, if appropriate, to wrist, following appropriate verification procedures.
J. Care of patient's clothing: Send as much as possible home!
   1. Send all wet or soiled clothes home with relatives if possible. Note disposition of clothing on Admission: Valuables Disposition.
   2. Store patient's clothing in closet that is assigned to his/her bed.
   3. Have patient sign the Admission: Valuables Disposition on the electronic tablet to acknowledge they
are releasing the hospital of liability for patient's valuables. Print a copy for the patient's records.

K. Check physician orders for prescribed/ordered treatments (be especially perceptive to those that need to be started immediately).

L. Give each new patient a patient care kit.

M. Give ice water if allowed.

N. Make an effort to help the patient feel at home.

O. Explain briefly the hospital routine.

P. Adjust the light and temperature for his comfort.

Q. Be sure the patient has enough bed clothing to keep him warm.

R. Adjust side rails as a safety measure, if necessary.

S. Document vital signs, observations of patient's condition, patient's reaction to hospitalization and any treatments done, including the family's response if applicable.

**Care of valuables (see also Valuables policy):**

A. Encourage patient to send large amounts of money (over $5.00) home with the family. Large amounts of money are not to be kept at the bedside.

B. Patient will sign Admission: Valuables Disposition stating the hospital is not responsible for valuables. If unable to send valuables home, they are to be inventoried by two nurses and placed in the Patient Valuables Envelope (both nurses are to initial/sign the envelope).

**Narcotics should be counted and double signed by 2 RN'S and placed in pharmacy with proper identification label affixed and placed in pharmacy per protocols. Multiple meds are to be put in a white bag with label affixed and sent to pharmacy per protocol. NO medications are to be left at bedside with patient.**

**Admission of the unresponsive patient:**

A. Two nurses shall list clothing and valuables. Both nurses must sign the Patient Belongings list and Patient Valuables envelope.

B. Examine all articles carefully. Listings must be explicit and complete.

All revision dates: 03/2019, 12/2016, 12/2015, 01/2012, 01/2012, 06/2010

**Attachments:**

**Approval Signatures**

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<thead>
<tr>
<th>Approver</th>
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<td>Randy Coffell: HR Director/Safety/Education</td>
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<td>Erin Andreas: Acute/OB Manager</td>
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