SCOPE

This policy applies to all PeaceHealth settings and services:

☐ Cottage Grove Medical Center  ☐ Peace Island Medical Center  ☒ St. John Medical Center
☐ Ketchikan Medical Center  ☐ Sacred Heart River Bend  ☐ St. Joseph Medical Center
☐ Peace Harbor Medical Center  ☐ Sacred Heart University District  ☐ United General Medical Center
☐ PeaceHealth Medical Group  ☐ Southwest Medical Center  ☐ System Services Center
☐ PeaceHealth at Home  ☐ PeaceHealth Labs  ☐ Ketchikan Long Term Care

PURPOSE

The purpose of this policy is to establish a policy relating to admission guidelines for patients.

POLICY

In accordance with PeaceHealth job descriptions, admission shall be carried out in an approved, standardized sequence in order to accomplish safe, organized patient care.

1. Requirements:
   1.1. All patients admitted to the hospital for medical services must have a physician order for admission and be admitted to an attending physician.
   1.2. Patients who are admitted as inpatient, observation, or ambulatory status will be registered by Admitting Department staff through patient and/or family interview in the Admitting Department or at the patient’s bedside.
   1.3. Patients will be identified and name band placed in accordance with the Patient Identification policy.
   1.4. All admissions from any location, including the Emergency Department, outpatient clinics, and hospital transfers, are coordinated through the Nursing Supervisor in collaboration with the charge nurse/unit manager. Also see policy: Patient Placement/Bed Utilization and unit-specific policies. Each of the following are considered when making a bed or room assignment:
      • Diagnosis
      • Infection control and isolation
• Acuity and fall potential
• Age, gender
• Available nursing staff

1.5. Decisions regarding placement and timing of the admission will be based on bed and
patient care staff availability to meet patient care needs.

1.6. Patients arriving from the Emergency department to Critical Care shall have patent IV
access and be transported via stretcher with an ACLS certified RN and a cardiac
monitor/defibrillator (see policy 402.387.225: Transfer and Transport of Patients).

1.7. SBAR Report will be given to the receiving RN.

2. Upon Patient Arrival:

2.1. Confirm admission orders.

2.2. Verify identification by asking the patient two patient identifiers. Remove the
Emergency Room ID band and replace with inpatient unit ID band. Confirm identifiers to
name band, admission papers and patient chart labels. See policy: Patient Identification.

2.3. Review and update patient's allergy status and attach allergy bracelet, if indicated.

2.4. Place Fall Risk band and/or Allow Natural Death band if indicated per policy

2.5. Initiate routine and STAT orders per policy

2.6. Review medication reconciliation per policy. Complete or update as needed. (See
policy: Medication List Reconciliation.)

2.7. Complete patient assessment per unit standards and policy Plan of Care.

2.8. Account for patient's belongings in accordance with policy 101.356.59: Patient
Belongings. Encourage patient to send home any unnecessary belongings and
medications. Any medications unable to be sent home shall be secured and stored in
Pharmacy (see policy 100.3.124: Patient's Own Medications).

2.9. Complete unit orientation for patient/family including:

• Use of nurse call/intercom
• Bed controls, TV and over-bed light
• Location of closet and bathroom
• Safety precautions, including fall prevention and isolation precautions as indicated
  specific to individual patient assessment needs.
• Visitation expectations (see policy 100.3.112: Visitation)
• Location of visitor waiting areas and bathrooms
• Ordering meals through Guest Services

3. Documentation:
3.1. Document patient arrival and unit orientation in the electronic medical record.

3.2. Document completed general admission history in the electronic medical record

HELP

Further information may be obtained by contacting the Nurse Manager or Educator.

RELATED MATERIAL

Admissions from the Emergency Department to Hospital NSG-0973

Behavioral Health Inpatient Unit Admission Criteria 100.2.197

Critical Care Unit Admission and Discharge 402.139.1

APPROVALS

Initial Approval:

VP Patient Care Services approved on November 02, 2006

Subsequent Review/Revision(s):

VP Patient Care Services approved revisions November 19, 2009
VP Patient Care Services approved revisions on May 19, 2010
VP Patient Care Services approved revisions October 13, 2011
VP Patient Care Services approved revisions September 30, 2014
Director of Nursing approved review June 21, 2019

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