

MEDICAL STAFF STANDARD

SUBJECT: Physician Orders
RESPONSIBLE PERSONS: St. Ann's Medical Staff
POLICY:

- **VERBAL AND TELEPHONE ORDERS:** a licensed healthcare professional (e.g. registered nurse, licensed physical therapist, etc.) who is employed by the hospital or has been granted clinical privileges or responsibilities may receive a verbal or telephone order from the practitioner who is a member of the Medical Staff or has temporary privileges (fast-tracked privileges, expedited privileges or emergency privileges) in the hospital.

Physician Signature:

All verbal and telephone orders for medications must be signed within 2 calendar days.

All restraints and code status orders must be signed by a practitioner within 1 calendar day.

All other verbal and telephone orders should be authenticated by a physician as soon as possible, but no later than 30 days post discharge.

- **ORDERS BY MEDICAL STAFF:** all orders for treatment shall be approved by the attending physician, the attending physician's designate or a member of the Medical Staff.
- **ORDERS BY HOUSE OFFICERS:** house officers (St. Ann's Practice Group, Surgical House Staff, Orthopedic House Staff and Urgent Care Physicians) may write orders on patients as indicated.
- **AUTOMATIC CANCELLATION OF ORDERS:** all previous orders, including standing orders, are automatically canceled at the time of surgery, or when a patient is transferred from Labor and Delivery undelivered or when transferred to ICU/CCU.
- **PATIENT TRANSFER:** when the patient is transferred within the same organization from one service to another and the caregivers change, a transfer note is written. A transfer note should briefly describe the patient's condition at the time of transfer and the reason for the transfer.
- **INFORMED CONSENT:** a general authorization for treatment form, signed by the patient or legally authorized person on behalf of the patient, must be obtained at the time of admission. This informed consent does not obviate the practitioners' responsibility for informing the patient of, and receiving a consent to, special treatment or surgical procedures to be performed by the practitioner and document that informed consent. Each procedure during the patient's stay in the hospital requires that an informed consent be obtained and documented.

Informed consent for non-emergent blood & blood product transfusions is the responsibility of the practitioner ordering blood products and that the entry is made in the medical record prior to any procedure acknowledging the consent.

In those situations where the patient's life is in jeopardy and suitable signatures cannot be obtained due to the condition of the patient, for emergencies involving a minor, an unconscious patient or an incompetent patient in which consent for surgery cannot be immediately obtained from parents, guardian, or next of kin, these circumstances should be fully explained in the patient's medical record.

DEVELOPED BY: St. Ann's Medical Staff **ORIGINAL DATE:** February 1974
REVIEW/REVISION DATE: 11/ 2002
REPLACES: Medical Staff Rules & Regulations
REVIEWED BY: Medical Executive Committee 11/4/2002
APPROVAL FOR IMPLEMENTATION BY: St. Ann's Hospital Board of Trustees
DATE: 12/17/2002

Signature on File
Steve Tuttle, M.D., President, Medical Staff

Signature on File
Kirk Hummer, RN, Chief Operating Officer