

## ADMIN – ADMITTING SECTION

### POLICY ON PATIENT REGISTRATION

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – ADMITTING – 001	
<i>Reviewed by:</i>	<i>Reviewed by:</i>
<b><i>Celestine T. Garcia</i></b> <b><i>OIC – Admitting</i></b>	<b><i>Anna Katrina Venice L. Rodriguez, RN, MMHoA, C.H.A</i></b> <b><i>Administrative Division Head</i></b>
<i>Approved by:</i>	<i>Approved by:</i>
<b><i>Jefferson R. Pagsisihan, MD, MHM</i></b> <b><i>Hospital Administrator</i></b>	<b><i>Ephraim Neal C. Orteza, MD, MHA</i></b> <b><i>Hospital Director</i></b>
<i>Date of Last Review: July 2018</i>	

**OBJECTIVE:** This policy shall aim to enhance the system for gathering information and recording them into designated logbooks.

**COVERAGE:** This policy shall cover this section.

**RESPONSIBILITIES:**

- I. It shall be the sole responsibility of this Section to gather accurate information on all the clients of this institution and to follow the system of recording as adopted from that of other government hospitals.
- II. It shall be the responsibility of the Nursing staff to inform the Admitting Section for any connection.
- III. It shall be the responsibility of the Admitting Staff to make correction with their corresponding initials.

**POLICY:**

- I. This policy shall enforce the importance of acquiring accurate but concise information on all clientele of this institution as this can be a valuable source of data for their thorough medical evaluation and examination by the medical staff.
- II. This policy shall also ensure that all data sourced are verified and up to date at all times.

**PROCEDURE:**

- I. Classification of patients shall be indicated in all issued slips for consultation, whether from ER or OPD.
- II. For NEW PATIENTS:
  - a. This Office shall include the following information on interview: Full Name (given, middle and last), age/sex, complete and present address, birth date and birthplace, and signature of patient or authorized representative.
  - b. A unique Hospital Number shall be assigned to each entry into the logbook to eliminate confusion and duplication.
  - c. This regard shall be issued to patient prior to proceeding, to area of consultation.
- III. For OLD PATIENTS:
  - a. Patient and/or relative shall be asked to proceed to the Medical Records Section, if open, to secure to old records. If closed, this Section shall issue a temporary OPD chart bearing the following, information: hospital number, full name, age and sex.
  - b. Recording shall likewise be done by this section.
  - c. Patient and/or relative shall proceed to area of consultation.
- IV. All patients for OPD consultation shall be issued number before proceeding for registration.
- V. If patient at ER for consultation, a corresponding ER slip shall be issued with complete name of patient with properly classified ML or not.

**Implementation Date:**

This policy has been implemented since 1978 with some revisions made to adopt to the new system of patient recording.

**Schedule for Policy Review:**

This policy shall be reviewed every two (2) years or as deemed necessary.

**Last Reviewed:**

July 2018

## ADMIN – ADMITTING SECTION

### POLICY ON PATIENT’S ADMISSION

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – ADMITTING – 002	
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Date of Last Review: July 2018	

**OBJECTIVES:** This policy shall serve as the guidance on the admission of patients.

**COVERAGE:** This policy shall cover this Section, Medical Records Section and the Nursing Division.

**RESPONSIBILITIES:**

- I. This shall be the responsibility of the Nursing Staff at the ER/NICU to issue Notice Slip to this Section for every admission.
- II. It shall be responsibility of the Medical Records Section issue the Out Patient record of all OLD (previously treated) patients for admission to the Emergency Section to facilitate proper evaluation and treatment by the medical staff.
- III. It shall be the responsibility of this Section to facilitate the accurate but swift gathering of information about the patient; to complete the records and log down separately each admission.

**POLICY:**

- I. This policy shall enforce that all abide with the scheme in admitting all patients catered to by this healthy facility.
- II. This policy shall ensure the accuracy of all data incorporated into each record for the future reference.

## **PROCEDURE:**

### **I. ADMISSION FROM THE EMERGENCY SECTION:**

- a. While being evaluated by the Medical Staff, patient's relative is asked by the ER staff to secure OLD record, if any, at the Medical Records Section. If none, to secure a NEW OPD record at the Admitting Area.
- b. Once for Admission the ER staff shall issue a Notice Slip for admission to the relative of patient along with the record.
- c. Admitting Clerk shall complete data/information necessary for admission and log down for recording. All Medico-Legal cases are logged to outpatient logbook. Any observed discrepancy in data retrieved must be followed up by this Section while the patient is admitted. Secure necessary documents (Barangay Clearance, Voter's ID, etc.) to verify all gathered information.
- d. All admitted cases shall be validated by the Social Worker for proper classification (Walk-In Private, Service, Indigent).
- e. All admission records must be properly signed before issuance back to ER staff.

### **II. ADMISSION FROM NICU SECTION**

- a. NICU staff shall issue a notice of admission attached to the admission records to any baby that will stay than 24 hours. This notice shall contain the baby's assigned hospital numbers as logged in their records book.
- b. Notice and record shall be forwarded to this Section by the NICU staff, classified as private or service.
- c. The admitting staff shall verify data on hand prior to any entry to logbook. He/she shall then copy the NICU's hospital number and log on, with the admitting staff signature.

- III. This Section shall make a daily admission census and furnish the Records Section a copy every end of the month.

#### **Appendix:**

##### **Notice for Admission**

#### **Implementation Date:**

**This policy has been implemented since 1994 to the present**

#### **Schedule for Policy Review:**

**This policy shall be reviewed every two (2) years or as deemed necessary.**

#### **Last Reviewed:**

**July 2018**

OSPITAL NG PARAÑAQUE  
ER ADMISSION SLIP

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ TIME: \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_

CAD: \_\_\_\_\_

ROD: \_\_\_\_\_ NOD: \_\_\_\_\_

OSPITAL NG PARAÑAQUE  
ER ADMISSION SLIP

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ TIME: \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_

CAD: \_\_\_\_\_

ROD: \_\_\_\_\_ NOD: \_\_\_\_\_

DAILY ADMISSION				
Hospital Numbers	Date of Admission	Name of Patient	Age	Attending Physician

Administrative Division

## ADMIN – ADMITTING SECTION

### POLICY ON DISCHARGE OF PATIENT

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – ADMITTING – 003	
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Date of Last Review: July 2018	

#### OBJECTIVES:

To provide an accurate recording of all discharged patients of this hospital.

#### COVERAGE

This shall cover this Section and the Nursing Division.

#### RESPONSIBILITIES:

- I. It shall be the responsibility of the Head of this Section to monitor the effectiveness of this policy; to assure the accuracy of data recording into the Discharge Logbook.
- II. It shall be the responsibility of the Nursing Staff (Ward, NICU, ER/Hydration) to assist this section to completed the data necessary for accurate recording.

#### POLICY:

This policy shall ensure the timeliness and completeness of all pertinent data incorporated into this policy so as to eliminate duplication and confusion.

#### PROCEDURE:

- I. The admitting staff on duty shall make daily rounds for admission and discharges at the concerned areas every end of the shift to update records, especially concerning Emergency transfers or discharges after routine check out time.
- II. The nursing staff assigned in Areas of Concern shall assist the former so as to ensure the completeness of data recorded.

- III. This section shall ensure that records return to the Wad shall contain check out time/date, final diagnosis and disposition of patient.

**Appendix:**

Daily Discharges Census

**Implementation Date**

This policy was implemented since 1978 to the present.

**Schedule for Policy Review:**

This policy shall be review every two years as deemed necessary.

**Last Reviewed:**

July 2018

Administrative Division



## APPENDIX: DAILY DISCHARGE

[illegible]

# ADMIN – ADMITTING SECTION

## POLICY ON REPORTING OF EMERGENCY TRANSFERS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – ADMITTING – 004	
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Date of Last Review: July 2018	

**OBJECTIVES:** To provide an accurate listing of patients at any given time.

**COVERAGE:** This policy shall cover all Divisions of this hospital.

**RESPONSIBILITIES:**

- a. It shall be the responsibility of this Section to provide a complete and correct listing of admitted patients at any given point in time.
- b. It shall be the responsibility of the Social Service Section to attend to all Emergency Transfers whenever possible so as to affect a smooth flow in discharge and to notify this Section of all cases.
- c. It shall be the responsibility of the Nursing Staff (Aide or Clerk) to attend to all such cases especially in times when no Social Worker (SW) is available; to follow the procedures incorporated and to contribute to completeness of listing mentioned previously.
- d. It shall be the responsibility of the Cash Section to issue Promissory Note(PN) in cases when the Social Worker is not available to execute such.

**POLICY:** This policy shall ensure the efficiency in reporting as well as recording of all patients transferred out of this hospital outside of the ordinary conditions making it emergency.

**PROCEDURES:**

- I. The Nurse Aide shall inform the SW of any case of Emergency transfer immediately after the Attending Physician has opted for this.
- II. The SW shall attend to the case by asking the relatives to undergo clearance from the three (3) clinical areas, namely: the Pharmacy, Laboratory and Radiology Sections.
- III. Once completed the relative shall proceed to pay the Hospital charges at the Cash Section.
- IV. Once completed, the SW shall ask the Admitting Clerk to sign on the Clearance slip in short of any notification.
- V. However, in cases when no SW is available the Nurse Aide/Clerk shall be tasked to perform the above procedures. He/she shall ask the Cash Section to execute PN and attach to clearance clip. These documents shall be forwarded to the Social Service section the following working day.

**Appendix:**

Clearance slips for emergency transfers

**Implementation Date:**

This was implemented in 2003 as a solution to this perennial problem

**Schedule for Policy Review:**

This policy shall be reviewed every two years or as deemed necessary

**Last Reviewed:**

July 2018

## ADMIN – ADMITTING SECTION

### POLICY ON REPORTING OF RECLASSIFIED PATIENTS

ADMINISTRATIVE DIVISION APPROVAL MATRIX POLICY NO. ADM – ADMITTING – 005	
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Date of Last Review: July 2018	

**OBJECTIVES:** To keep the confidentiality of the patient's records and to defend the hospital against unjust accusations made by the other patients.

**COVERAGE:** This policy shall cover this section, the social service section and the nursing service.

**RESPONSIBILITIES:**

It shall be the responsibility of the Nursing Staff (Aide or Clerk) to notify the Admitting Section and the Social Service Section for any possible procedures.

**POLICY:** This policy shall ensure the efficiency in regarding as well as in recording of all patients transferred from private to service patient.

**PROCEDURES:**

- I. The Nurse Aide/Clerk shall inform the SW of any admitted case who so desires to have a change in classification (Service to private and Vice versa)
- II. The SW will conduct an interview to support change in classification and shall inform the Nursing Staff of approved changes in classification. The same will record down date of change in classification for purpose of fees.

III. Nursing staff shall inform the Admitting Section of reclassification made.

**Implementation Date:**

Implemented sin 1979

**Schedule for Policy Review:**

Reviewed periodically as necessary

**Last Reviewed:**

July 2018

Administrative Division