# HEALTH INFORMATION SERVICES POLICY AND PROCEDURE MANUAL

MANUAL CODE:

A-6

SUBJECT: APP	ROVAL OF	NEW OR	REVISED	FORMS FOR	THE MEDICAL	RECORD
--------------	----------	--------	---------	-----------	-------------	--------

 Effective Date: 8/99
 Review/Revision Date: 8/02; 7/04; 12/04; 2/05; 4/05; 8/06; 11/07; 3/08; 1/09; 9/09; 5/11
 PAGE \_\_1\_\_ OF \_\_4\_

 PREPARED BY:
 APPROVED BY: Carolyn Gardner

PREPARED BY:
Carolyn Gardner
Associate Director
Health Information Services

Associate Director
Health Information Services

nealth information Services

#### I. Purpose:

This policy describes the process for obtaining Medical Record Committee and Executive Committee approval of new or revised forms for use in the medical record.

- II. Guidelines for Submitting Proposed Forms or Changes:
  - A. The Forms Coordinator should be notified of the intent to submit new forms or revisions to the Medical Record Committee. A copy of the forms approval policy and procedure and justification sheet will be provided.
  - B. The Medical Record Committee meets the first Monday of each month at 4:00 p.m. A copy of the new or revised form must be submitted to the Health Information Services Forms Coordinator for review at least three weeks prior to the meeting of the Medical Record Committee. The requester will need to make any revisions needed and return the corrected forms to the HIS Forms Coordinator.
  - C. By Monday the week prior to the meeting, the following items must be submitted to the Forms Coordinator who will deliver them to the Medical Staff Coordinator to email copies to the Medical Record Committee members for review:
    - Completed "justification sheet" signed by the medical director/department chief requesting approval of the new/revised form (this form is available online on the UMMC Intranet by clicking on Departments, select Health Information Services, go to Forms Approval)
    - A draft of the form:
    - 3. A form completed with "mock" patient information;
    - 4. An old form, if a revision of an existing form; and
    - Memo to chairman of the committee requesting placement of the item on the agenda of the next meeting. The memo must include the name of the individual who will present the proposed form.
  - D. Preprinted physician orders must go through this approval process and require the approval of the Pharmacy Department prior to submission to the Medical Record Committee. All physician orders must be written or typed on a single page form. Orders must not be written or typed on back of the page.
  - E. All consent/authorization forms require approval by legal council prior to submission to the Medical Record Committee.
  - F. The proposed forms are then presented at the Medical Record Committee by the person desiring the form approval.

### HEALTH INFORMATION SERVICES POLICY AND PROCEDURE MANUAL

MANUAL CODE:

A-6

#### SUBJECT: APPROVAL OF NEW OR REVISED FORMS FOR THE MEDICAL RECORD

Effective Date: 8/99 Review/Revision Date: 8/02; 7/04; 12/04; 2/05; 4/05; 8/06; 11/07; 3/08; 1/09; 9/09; 5/11 PAGE 2 OF 4

- G. After the form is approved by the Medical Record Committee, the Medical Staff Coordinator will submit it to the Executive Committee the following month for approval.
- H. The Medical Staff Coordinator notifies the Forms Coordinator regarding forms approved by Executive Committee.
- I. When approved by the Medical Record Committee and Executive Committee, a new form must be assigned a form number.
  - 1. If the form is to be housed in the storeroom: An original draft of the form and a copy of the justification sheet noting committee approval should be taken to the designated representative in the storeroom for assigning of a form number and indication of approval with date. These numbers should be given to the Forms Coordinator in Health Information Services as they are assigned.
  - If the form is to be produced in the printing department and not stocked in the Storeroom: an original draft of the form should be taken to the Forms Coordinator in Health Information Services for assigning of a form number and indication of approval with date. These numbers will start with MR0001 and be assigned consecutively.
- J. When approved by the Medical Record Committee and Executive Committee, a revised form will retain the same form number. The approval date should be changed to read the revised date.
- III. Requirements for forms include:
  - A. All forms should be 8.5" x 11", with 5 holes punched on the left side of the form for filing in the medical record. (Exception: special lab slips, which are to be 7.24" x 3.25" if stored electronically.)
  - B. A 1" margin should be provided on the left side of the front of the form and the right side of the back of the form for binding into the medical record.
  - C. Space (3.75"w x 2.50" long) should be provided for the patient's name and medical record number to be printed in the upper right corner (the addressograph stamp) on the front or label. The back of the form requires fields for the patient name and medical record number across the top.
  - D. New brand logo, **University of Mississippi Health Care Jackson, MS**

and the title of the form must be on the front of the form in the upper left corner.

- E. Forms should be printed on front and back if possible, rather than on two separate pages. The patient's name:\_\_\_\_\_\_ and MRN:\_\_\_\_\_\_ is to be listed on all pages of the document. Page number should be listed on the bottom right hand corner of the form as "Page 1 of 1".
- F. The form may be computerized, or produced by the UMC printing department, or an outside agency. A photocopy is not acceptable.

### HEALTH INFORMATION SERVICES POLICY AND PROCEDURE MANUAL

MANUAL CODE:

A-6

#### SUBJECT: APPROVAL OF NEW OR REVISED FORMS FOR THE MEDICAL RECORD

Effective Date: 8/99 Review/Revision Date: 8/02; 7/04; 12/04; 2/05; 4/05; 8/06; 11/07; 3/08; 1/09; 9/09; 5/11 PAGE <u>3</u> OF <u>4</u>

- G. The original copy of a multi-part form should be designated for filing in the medical record.
- H. For forms that are to have information handwritten, adequate space between lines for writing should be provided. These are to be 2 pica lines apart, as on standard notepaper (5/16 inch high).
- I. Prohibited abbreviations are not to be used on any form. The Do Not Use Abbreviation list can be obtained from the UMMC Intranet by clicking on Departments, select Health Information Services, go to Do Not Use Abbreviations.
- J. Use "Adverse Drug Reaction" or "Drug Allergy" which ever is applicable.
- K. The approval date of the Executive Committee and the form number should be printed in the lower left hand corner. This information should also be included on all approved forms.

#### IV. Form availability:

- A. When the form to be approved is a revision of an old form and is housed in the storeroom, the person requesting the form is to contact the storeroom manager to determine the cost for implementing the form.
- B. Approval by the associate/assistant hospital director may be required as requested by the storeroom manager for immediate form availability.
- C. The applicable hospital or nursing service sponsor is to be contacted to ensure old forms are pulled from Storeroom stock.
- D. A copy of the printed approved form is to be given to the HIS Forms Coordinator.

#### V. Piloting

- A. Under special circumstances approval may be granted by the Medical Record Committee Chairman for a form to be piloted for use prior to submission for approval.
- B. The date the pilot began and the word "pilot" should be printed in the lower left hand corner on the form. Forms can be piloted up to 60 days. (Exception): Standardized Order Set/Clinical Pathway. The standardized order sets and forms from the Standardized Order Set/Clinical Pathway website will be in a continuous pilot phase, which will allow them to be changed easily if needed and allow for the order set to have accurate evidence.

#### VI. Definitions

A. A medical record form is any UMC hospital approved form filed permanently in the UMC medical record and identified by a document form number assigned by the Medical Record Forms Coordinator.

## HEALTH INFORMATION SERVICES POLICY AND PROCEDURE MANUAL

MANUAL CODE:

A-6

SUBJECT: APPROVAL OF NEW OR REVISED FORMS FOR THE MEDICAL RECORD

Effective Date: 8/99 Review/Revision Date: 8/02; 7/04; 12/04; 2/05; 4/05; 8/06; 11/07; 3/08; 1/09; 9/09; 5/11

PAGE <u>4</u> OF <u>4</u>

- B. A document owner is the department initiating a new or revised medical record form.
- C. An authorized form is a form that has been approved through the Medical Record Forms Committee and the Executive Committee.
- D. An unauthorized form is a form that has not been through the Medical Record Forms Committee (MRC) or the Medical Executive Committee (MEC), and will not be placed in the medical record.

Medical Record Form