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|  A MAJOR HEALTH PARTNER | Hospital Admissions |
| Hospital Admissions SPP: MS-17 Cancels: None Latest Revision or Review: 05/23/16 | Formulated by: Medical Staff Office/Administration Approved by: Medical Executive Staff, Board of Directors Date Approved: 09/23/2013 Effective Date: 09/23/2013 |

PURPOSE: **To describe Practitioner requirements for the processes of patient admission to the hospital.**

GUIDELINE STATEMENTS:

1. General Hospital Admission Requirements

- 1.1. A patient may be admitted to the hospital only by a **M.D. / D.O** who has been granted admitting privileges.
 - 1.1.1. A nurse practitioner or a physician assistant who has not been granted admitting privileges by the hospital's medical staff may act as a proxy for the ordering M.D. / D.O. which allows them to write inpatient admission orders on his or her behalf, if the ordering M.D. approves and accepts responsibility for the admission decision by countersigning the order prior to discharge.
 - 1.1.2. Emergency department physicians, nurse practitioners and physician assistants who do not have admitting privileges are authorized to write temporary or "bridge" orders for inpatient admission on behalf of the ordering physician, if the ordering practitioner approves and accepts responsibility for the admission decision by countersigning the order prior to discharge.
- 1.2. Patients presenting for admission who have no attending physician shall be attended by members of the Active Staff in the service to which the needs of the patient indicates the assignment. The Service Chief shall have authority to call any members of the Medical Staff to attend a patient as is necessary.
- 1.3. All inpatients and MOB patients, excluding newborns born at Major Hospital, must have documented assessment and admission orders signed by a M.D. / D.O. either at the referring site or in a timely manner after arrival to the hospital.

2. Direct Patient Admissions

- 2.1. Practitioner to inform patient to report to the hospital within one (1) hour after the office visit.
- 2.2. Practitioner will notify hospital staff of the anticipated arrival time of the patient.
- 2.3. If the patient fails to show up at the designated time, hospital staff will notify the referring practitioner to allow the office to call the patient for further instructions.
- 2.4. If the patient admission occurs after the Hospitalists have left the hospital, the referring practitioner will contact the on-call Hospitalist for discussion regarding appropriate care and treatment.

3. Reviewing & Revising

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| Reviewed | Revised |
| 03/31/2015 | 05/23/16 |

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4. Regulatory : CMS, Center for Medicare, Hospital Inpatient Admission Order and Clarification
January 30, 2014