

LAC+USC MEDICAL CENTER

DEPARTMENT OF NURSING SERVICES POLICY

Page 1 Of 3

Subject: PATIENT DISCHARGE		Original Issue Date: 08/91	Policy # 720
		Supersedes: 11/18	Effective Date: 04/22
Departments Consulted:	Reviewed & Approved by: Professional Practice Committee Nurse Executive Council Attending Staff Association Executive Committee	Approved by: (signature on file) Nancy Blake Chief Nursing Officer	

PURPOSE

To describe the process for discharging patients in a manner that maximizes the utilization of beds and supports the patient's needs, the clinical requirements, and the operational efficiency of the LAC+USC Medical Center (LAC+USC).

POLICY

Nursing staff shall be compliant with LAC+USC Medical Center policy #720. The interdisciplinary patient care team shall be responsible for the coordination, collaboration, and design of the patient's discharge plan to ensure that his or her continuous health care needs are addressed. Patients shall be discharged upon the written order of the provider of record. Discharge from the Medical Center shall be as early in the day as possible after the patient's discharge needs are met.

A minor may be released to a parent, guardian, or agency that admits the minor on its authority. An emancipated minor, self-sufficient minor, minor on active duty with the Armed Forces, or a minor married or previously married may be released on his or her own authority.

After the patient has left the facility either by discharge or against medical advice (AMA), his or her return to the facility shall be considered a new admission/visit.

PROCEDURE

Patient discharge is initiated upon admission in the Admission History form in the electronic health record (EHR). Discharge information will be collected throughout the hospital stay.

The Registered Nurse's (RN) responsibilities include:

- Perform ongoing assessments of patient discharge needs including teaching, referral to appropriate resources, and the use of supplies/equipment.
- Initiate the plan for discharge involving the necessary interdisciplinary health care team members.
- Instruct and counsel the patient/family with consideration to identified patient care needs in collaboration with the interdisciplinary team
- Confirm the patient's and/or family's understanding of identified patient care needs prior to discharge by using the teach back method.
- Document all discharge planning and patient/family education in the medical record.
- Evaluate the effectiveness of discharge teaching and revise discharge plan as appropriate.

Subject:

PATIENT DISCHARGE

Effective Date:

04/22

Policy #

720

Initials:

- Evaluate patient has the supplies/equipment, follow -up clinic and outpatient care (i.e dialysis center) needed upon discharge.
- Work/School Restrictions, if applicable
- Return patients record of valuables slip, in-home medication slip and all personal belongings, if applicable.
- Review the nursing discharge tab and completes the applicable sections.
- The nurse completes the nursing discharge summary.
- The nurse completes a nursing discharge note.

Patients Identified at Risk for Suicide during Current Hospital Stay

- Prior to discharge patients who were identified at risk for suicide will have a Suicide Risk Screening done.
- Discharged patients will be provided with emergency psychiatric telephone numbers
 - ❖ Suicide Prevention Center 24-hour Access Hotline Number: 1-877-727-4747
 - ❖ Department of Mental Health 24-hour Access Hotline Number: 1-800-845-7771
 - ❖ Call 911

(Exception: Upon discharge, an incarcerated patient (i.e. Twin Towers, Juvenile Hall or Metro State Hospital) will have discharge paperwork sealed in an envelope and given to the Sheriff Deputy/ staff transporting the patient back).

Prior to Discharge

Patients will be offered appropriate clothing.

- ❖ Clothing items are available in the Volunteers Office in IPT room #1K311, phone ext. 96945
- ❖ The Volunteers Office hours are as follows:
 - Monday thru Friday 800am –1800pm
 - Saturday & Sunday - CLOSED
- ❖ During off-hours, clothing items can be obtained from the Discharge Lounge ext: 92281.
- Remove patient identification band.

Discharge Lounge

A Discharge Lounge is available in the Medical Center for patients who have a provider's order for discharge and awaiting the completion of the discharge process (i.e awaiting transportation, and/or prescriptions filled) (refer to #725 Discharge Lounge Nursing Policy).

Post Anesthesia Recovery Unit Discharge

Outpatients may be discharged home or to the Discharge Lounge from the Post Anesthesia Recovery.

		Page 3	Of 3
Subject: PATIENT DISCHARGE	Effective Date: 04/22	Policy # 720	
	Initials:		

Moderate/Deep Sedation Procedural Discharge

Any patient being discharged within 24 hours of a procedure requiring Moderate/Deep Sedation must be evaluated and given written discharge instructions prior to discharge. Refer to LAC+USC Medical Center Policy, #905, “*Moderate Sedation / Deep Sedation*”

Ambulatory Care Patients and Procedural Areas

At discharge from the clinic, the following instructions will be given:

- Future clinic appointment, if applicable
- Patient teaching – after care instructions of new, changed, or discontinued treatment, prescribed tests
- Work/School Restrictions, if applicable
- Documentation of patient’s understanding of aftercare instructions in the EHR.

Emergency/ Urgent Care Department Discharge

At discharge from the Emergency Department, the following instructions will be given to the patient or their designated guardian, family member, or responsible person:

- Future appointments, if applicable
- Prescriptions, if applicable
- Patient teaching – after care instructions of new, changed, or discontinued treatment including prescriptions, prescribed tests
- Work/School Restrictions, if applicable
- Documentation of patient’s/family’s understanding of aftercare instructions
- Vital signs must be repeated at the time of discharge if the previous set of vital signs was abnormal, and the nurse will documents in the EHR and notify the provider.

REFERENCE

California Code of Regulations, Title 22, Section 70717, 70749
 Joint Commission Standards--Continuum of Care
 LAC+USC Medical Center Policy #211- Leaving Against Medical Advice
 LAC+USC Medical Center Policy #221- Legal/Surrogate Representative
 LAC+USC Medical Center Policy #720- Patient Discharge
 LAC+USC Medical Center Policy #905- Moderate Sedation / Deep Sedation
 LAC+USC Medical Center Policy #905 Attachment G- Moderate Sedation / Deep Sedation

REVISION DATES

92, 93, 95, 96, 97, 05/98, 04/00, 12/01, 04/05, 09/05, 03/07, 07/08, 03/09, 07/12, 07/15, 11/18
 04/22