

HARBOR-UCLA MEDICAL CENTER

SUBJECT: PATIENT IDENTIFICATION

POLICY NO. 452

PURPOSE:

To establish a practice for obtaining verification of, and confirming a patients' identity.

POLICY:

Harbor-UCLA Medical Center shall ensure that all patients are properly identified prior to provision of care, treatment or service. To ensure safety, at least two patient identifiers are required to validate a patient's identity prior to any of the following:

- Providing treatments or procedures
- Administering medications, blood, or blood products
- Obtaining blood or other specimens for clinical testing, or performing diagnostic test and imaging studies
- Bringing a patient from a waiting area to a screening area, exam room, procedure area, or treatment area
- Transporting or discharging patients, to include documentation (e.g., visit summary, appointment notices, etc.)
- Distributing diet trays
- Thawing/administering breast milk
- Dispensing discharge and outpatient prescriptions

All patients without proper identification (ID) will be deferred for any non-emergent medical care.

PROCEDURE:

I. CHECK-IN/REGISTRATION

Request the patient's name that will be on the acceptable identification to be provided for registration purposes.

1. For patients age 18 or older, verify the identity of all patients receiving care at a County facility. This is applicable to every outpatient, emergency room, and inpatient registration.
2. For patient under 18 years of age, verify the identity of the parent or legal guardian who is signing for consent, per DHS Policy 314.1. Where applicable, also obtain identification from the minor's parent.

EFFECTIVE DATE: 7/93

SUPERSEDES:

REVISED: 6/03, 9/03, 3/05, 6/09, 8/12, 12/14, 10/17

REVIEWED: 2/96, 2/99, 2/02, 6/03, 9/03, 2/06, 1/08, 12/14, 10/17

REVIEW COMMITTEE:

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HARBOR-UCLA MEDICAL CENTER

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Based on the Department of Health Services (DHS) Policy 370.1 regarding Patient Identity Verification, Registration and/or Nursing Check-in staff will verify the identity for all patients receiving care. Registration and/or Nursing Check-in staff will accept and use the following documents that includes a photograph to validate identity; ID should be scanned into the Electronic Health Record:

1. Valid California Driver's License (CDL) or driver's license from another state.
2. Valid California Department of Motor Vehicles (DMV) Identification Card or one from any another state.
3. Government issued identification card with the patient's photograph [i.e., Matricula Consular (From Mexico, Argentina, the Republic of Korea, and Peru only), military identification prison/jail or parolee identification, voter identification issued by foreign country, etc.].
4. Valid passport
5. Current school identification Card, which includes a photograph.

For existing patients who are not able to provide the identification with photograph indicated above, the following will be accepted:

Three (3) of the following items must exactly match his/her Health Information System records:

1. Name on an expired Driver's License or DMV Identification Card from California or any other state
2. Name on an expired Passport
3. Name on an Employee Identification Card with the patient's photograph
4. Name on an Expired Government Issued Identification card
5. Last four digits of Social Security Number*
6. Date of Birth*
7. Mother's maiden name*
8. Birthplace*
9. Scanned/legible copy of patient ID from Section

***May be provided verbally by the patient.**

NOTE: Legally responsible relative means "responsible relative" as defined in California Code of Regulations, Title 22, Section 50351.

Patients must provide documentation or information that meets the Patient Identity Verification requirements or the patient will be deferred for non-emergency non-urgent medical care.

The exception will be those patients who enter our Emergency Department (ED) as trauma patients. Their names will be corrected at admission or during their stay in the ED. For patients without acceptable identity verification, Registration and/or Nursing Check-in staff will verify additional demographic information (e.g., last four digits of their social security number, mother's maiden name, next-of-kin, etc.) to ensure the Medical Record Number (MRN) indicated on their hospital ID card belongs to that patient. New patients (i.e., no prior MRN) without acceptable identification will be deferred for any non-emergent medical care.

IDENTIFICATION LABELS

All patients will be issued a unique DHS Medical Record Number (MRN). At their visit/admission, they will have the MRN, Financial Identification Number (FIN), patient's full name, date of birth and visit date displayed on the labels and/or each patient form.

HARBOR-UCLA MEDICAL CENTER

SUBJECT: PATIENT IDENTIFICATION**POLICY NO. 452****II. PATIENT IDENTIFICATION BAND**

A patient identification (ID) band is printed from the Electronic Health Record (EHR) and secured to the patient. For inpatients and ED patients, this ID band shall remain on the patient until the patient is discharged. **Note:** When a patient's medical or mental condition precludes self-identification, refer to Hospital Policy No. 339: Identification of Unknown Named Patients.

1. The ED Nursing or Registration staff who identify the patients in EHR will place the patient ID band on all patients seen in the ED.
2. All direct admission patients (i.e., inpatient transfers except NICU/PICU transports) will be identified in the EHR by the Scheduled Admissions Office during regular hours, and after hours by ED Registration staff. They will print the ID band and secure it to the patient.
3. Scheduled Admission Office staff places the patient ID band on Urgent/Clinic/Scheduled Admissions.
4. Clinic staff place ID bands on:
 - Patients unable to identify themselves when asked
 - Patients scheduled for one-day surgery
 - Patients admitted through the clinic
 - Patients having a procedure that requires written informed consent
5. Nursing staff places the ID bands on:
 - All newborns
 - PICU/NICU direct admit (transport) patients

Note: In extreme circumstances, it may be necessary to remove the ID band from an infant e.g., very low birth weight infant in which ID band either cannot be secured to the patient; or securing it will result in injury. In such cases, the ID band is secured to the incubator. When this practice is necessary, the ID band shall remain present on the incubator with the baby until such time that a new band can be secured to the baby.

6. Nursing staff replace any missing or illegible ID bands as soon as their absence or illegibility is discovered.

III. VERIFICATION OF PATIENT IDENTITY

At least two patient identifiers are used to verify the patient's identity prior to performance of any of the previously identified procedures (see Policy Statement) except in the case of a life-threatening emergency. Whenever possible, patients will be actively included in the identification process. The following are the minimum criteria to include when verifying identification:

A. Inpatients and Emergency Department

Verify name and MRN from the ID band. If the patient is able, also ask them to state their name.

HARBOR-UCLA MEDICAL CENTER

SUBJECT: PATIENT IDENTIFICATION**POLICY NO. 452**

B. Ambulatory Care Clinics

Ask the patient to state his/her name and date of birth. Confirm this information against the patient's identification (ID) card or information obtained from the patient's record. In the event that the card is not available, ask the patient his/her name and birth date, and confirm by comparing with one of the following additional pieces of identification:

- Driver's License
- Picture ID (which may already be scanned into the electronic record)
- Passport
- Alien Registration Card

C. Outpatient Holding Area (OPHA) and Outpatient Procedure Area (OPA)

Verify that the name and date of birth in the EHR matches the name and birth date on their acceptable ID document (this may be scanned into the EHR). If the patient does not have acceptable ID, the physician will be notified. If any disagreement or reasonable doubt occurs regarding the correctness of the patient identity, the surgery or procedure should not proceed until the identity issue is addressed and corrected to the satisfaction of all parties involved (Patient, Attending surgeon, Anesthesia provider, etc.). For patients who do not have acceptable ID, the emergency or exempt nature of the medical services provided shall be determined & clearly documented by the Attending surgeon performing the surgery or procedure.

D. Outpatient Pharmacy**1. Discharge prescriptions**

Discharge prescriptions will be released after verifying patient identity on the prescription with the name and MRN on the patient's ID card.

Note: Individuals may present on behalf of the patient to pick-up the prescription as long as they provide the patient's ID card.

2. Outpatient prescriptions

Prescriptions will be released after verifying agreement of patient identity using the EHR or patient's ID card containing the patient's name and MRUN or the pick-up receipt which has been imprinted with the patient's name and MRUN. If the hospital ID card or pick-up receipt is not available, the patient's name and date of birth will be used to verify identity.

E. Newborn Identification System

This additional banding system consists of 3 bands, each pre-printed with an identical 5-digit number. This 5-digit number is separate and distinct from a patient's MRUN and compared to verify the newborn's identity with the mother. Once the bands are placed, they are compared whenever infants have been separated and re-united with the mother.

IV. NAME ALERT

Nursing Staff will prepare and post a "name alert" label for any patients with similar/same names.

HARBOR-UCLA MEDICAL CENTER

SUBJECT: PATIENT IDENTIFICATION**POLICY NO. 452**

V. ERRORS OR CONFLICTS IN IDENTITY

Any name or date of birth changes/corrections are done only with verifiable proof of identification. Changes/corrections can be made at the time the error is identified if a copy of the document used to verify the name or date of birth is provided to the Admissions Office or ED Registration staff so it can be verified and scanned into the EHR.

A. Inpatients:

1. Changes are requested through the Admissions Office, Monday through Friday during regular business hours.
2. Changes and corrections are made through the ED Registration staff after hours, weekends and holidays.
3. When changes are made, Registration staff will notify the Nursing staff on the ward/ICU when they are complete so Nursing can print new labels and print a new patient identification arm band.

B. Emergency Department, Clinic and Outpatients

1. Patients will be referred to the Clinic Business Office or Registration staff.
2. After changing/correcting the error in the EHR, a new patient ID card will be generated by Registration staff and given to the patient.
3. Patients in the ED will have a new patient ID armband printed and placed on the patient by Registration/Nursing. New labels will also be printed by Registration staff/Nursing.

EXCEPTION:

For information regarding minors who may give consent on their own behalf, please refer to DHS 314.1 for guidance.

REFERENCE

DHS Policy 370.1 Patient Identity Verification