

**OLIVE VIEW-UCLA MEDICAL CENTER
DEPARTMENT OF EMERGENCY MEDICINE
POLICY & PROCEDURE**

**NUMBER: 3240
VERSION: 1**

SUBJECT/TITLE: ASSESSMENT / REASSESSMENT OF PATIENTS

POLICY: All patients are assessed and screened according to their history and physical examination to see if a medical emergency or condition exists. Patients are reassessed whenever indicated.

PURPOSE: To define assessment / reassessment in the DEM.

DEPARTMENTS: DEPARTMENT OF EMERGENCY MEDICINE (DEM)

DEFINITIONS: Evaluation of patients in the DEM.

- PROCEDURE:**
1. Their initial evaluation may include, but is not limited to their physical, psychological, pain and social status.
 2. As necessary, their nutritional and functional skills may be reassessed. Meals and snacks will be available when necessary and will be administered in a safe, timely and acceptable manner.
 3. Diagnostic tests are ordered according to the physician's assessment. Relevant clinical information will be provided with the request.
 4. Any possible victims of abuse or neglect are identified and are evaluated according to our policy and procedure.
 5. Patients are reassessed according to their level of acuity, their response to therapy and/or significant changes in the patients' condition.

Reassessment Guidelines:

Level 1 and 2: Continuous monitoring, unless otherwise indicated/change in acuity.

Level 3: Minimum every four hours, unless otherwise indicated/change in acuity.

Level 4 and 5: Minimum every eight hours, unless otherwise indicated/change in acuity.

6. The Attending Physicians determine the scope of assessment and care for patients in the Emergency Department based on:

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- a. the patients diagnosis
 - b. the care settings
 - c. the patient's desire for care
 - d. previous response to care
7. A registered nurse assesses the patient's need for nursing care in all settings where nursing care is provided.
 8. All assessments are individualized according to the age of the patient, i.e., infant, child, adolescent.
 9. Patients with emotional or behavioral disorders are assessed accordingly.
 10. Patients with alcoholism or drug dependency are assessed accordingly.
 11. Functional assessment must be done on patients referred for rehabilitation.
 12. Physicians, nurses and other pertinent individuals will integrate information from various patient assessments to assign priority for further care, including discharge planning.
 13. Care is planned and provided in an interdisciplinary collaborative manner whenever necessary, i.e., surgical, OB/GYN, medical consultation, appropriate evaluation and diagnostic tests are performed when indicated, and a presumptive diagnosis is recorded in the patient's medical record.
 14. A surgical pre-op list is completed on all surgical patients taken directly to the OR, except in occasional critical cases.
 15. The ED has a daily roster of physician and nursing staff. The on-call subspecialty staff are available through 24/7 pagers or through individual pagers found on AMION or through the hospital operator.

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References:	
Approved by: Dellone Pascascio (Chief Nursing Officer), Gregory Moran (Chief Physician)	Date: 04/13/2017
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