

**OLIVE VIEW-UCLA MEDICAL CENTER
NEUROLOGY DEPARTMENT
POLICY & PROCEDURE**

**NUMBER: 2161
VERSION: 2**

SUBJECT/TITLE: DOCUMENTATION STANDARDS FOR ATTENDINGS

POLICY:

1. The resident should place a note in ORCHID in a timely manner the same day as the inpatient consultation, hospital visit, or clinic visit is provided.
2. Attending review and signature should be placed in ORCHID within a timely fashion following consultation, hospital visit, or outpatient visit. Resident, fellow, or student notes should be edited when necessary, and an addendum entered into the note. Attending's may elect to create a separate ORCHID note, or may addend the resident or student note.
3. Examples of attending addenda may include a statement like: *"The patient was seen and examined with the resident. I agree with the findings, assessment, and with the plans we made for patient management."* Other formats may apply.
4. The ORCHID entry can be entered as a neurology consultation note or inpatient note, or free text note, and should include the type of note, reason for consultation, history of present illness, pertinent past medical history, review of systems, focused general/neurological examination, relevant labs or imaging, assessment and recommendations. If there are other aspects of the history or examination that have been included in the house officer's earlier note, a statement referencing those data in the house officer's note can be made in lieu of repeating that information.
5. Significant worsening of patient condition: The consultation attending or neurology resident should document instances of neurological worsening of a given patient (as judged by the neurology attending), explaining the time of worsening, the likely cause, recommendations for treatment, and, if indicated, a statement regarding prognosis. This note should also indicate that communication has occurred with the primary service, identifying the person communicated with. Preferably this communication should be attending-to-attending.
6. Urgent or urgent recommendations should also be communicated verbally to the primary team ASAP as clinically indicated. Either the resident note or the attending note should indicate that communication has occurred with the primary service, detailing the person communicated with.
7. These guidelines are not all-inclusive of the totality of clinical scenarios in which an attending note may be appropriate.

PURPOSE:

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DEPARTMENTS: NEUROLOGY

DEFINITIONS:

PROCEDURE:

References:	
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