

**VALLEYCARE**  
**OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS**  
**RESPIRATORY CARE SERVICES - ADULT**  
**POLICY & PROCEDURE**

**NUMBER: 830**  
**VERSION: 1**

**SUBJECT/TITLE: PRIORITY OF CARE**

**POLICY:** The defined priority of respiratory care to patients will be followed at all time.

**PURPOSE:** To assure the timely delivery of respiratory care to the patients requiring critical care.

**DEPARTMENTS: RESPIRATORY CARE SERVICES**

**PROCEDURE:** In the event of limited human resource allocations caused by increased in acuity, increases in DEM requests for therapy, Code Blue calls, critical care transports etc. The Respiratory Care Practitioners have been required to prioritize the requests for patient care from time to time. The assigned priority is as follows:

1. Emergency care takes precedence over all routine care.
2. Intensive care life support systems management takes precedence over all ward care.
3. Clinical care procedures take precedence over all diagnostic procedure a request, i.e. arterial punctures, bedside pulmonary screening, sputum inductions, and pulse oximeter checks.

Every effort will be made to fulfill all of the patient care requests that the department receive in a timely manner. However, it may be necessary for the ordering physician or house staff to perform bedside diagnostics studies when our critical and clinical respiratory care load exceeds our ability to deliver that therapy in a timely manner.

References:	
Approved by: Edward Richard Lind (Chief of Respiratory Therapy), Nikhil Barot ()	Date: 01/24/2017
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