

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

**NUMBER: 10888
VERSION: 1**

SUBJECT/TITLE: URGENT CARE INTAKE PROCESS

POLICY: Olive View-UCLA Medical Center Urgent Care Clinic
Urgent Care Intake Process

PURPOSE: To be able to quick register patients directly in the Urgent Care Clinic

DEPARTMENTS: NURSING

PROCEDURE: I. QUICK REG PROCESS

1. Patients presenting to the Urgent Care Clinic will have the first initial contact with nursing staff at Quick Registration. The Quick Registration Staff will begin the process of registering the patient into the ORCHID system, entering the patient's name, date of birth, and chief complaint.
2. After Quick Registration, the patient will be referred to PFS (Patient Financial Services) personnel for Registration.

II. PFS Financial Clearance (DHS vs Non-DHS PATIENTS)

1. PFS will check the patient's financial resource (Medicare, Medi-Cal, ATP, Commercial, or Private Insurance, Self-Pay/FCC).
2. If patient has no Commercial or Private Insurance, or Non-DHS Medi-Cal Managed Care coverage, patient will be seen.
3. If patient has Medicare HMO, Non-DHS Medi-Cal Managed Care, Commercial or Private Insurance, patient will be informed they are unable to be seen.
4. PFS will provide them with the Non-DHS Form listing their Primary Care Provider, including phone number and Health Plan information. They will be informed if they feel it is an Emergency, they can go to the nearest ER for help.

III. NON-ROUTINE PATIENTS (Cardiac/High)

1. Patients presenting to the staff at Quick Registration with non-routine (Cardiac or High) will require a Registered Nurse to be consulted.

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- a) The Registered Nurse performs a nursing assessment of the patient to determine the urgency of their condition (i.e. higher level of care or cardiac).
- b) Stable cardiac patients complaining of chest pain will be taken to Emergency Room triage for appropriate care. The Urgent Care Nurses will not enter patient's information into the ORCHID system.
- c) Patients with an emergent condition requiring immediate attention will be taken to the Emergency Room by a Registered Nurse, via wheelchair, at the discretion of the Nurse. They will bring the patient into ED 1 and care will be handed over to the Emergency Room Nurses.

IV. ROUTINE PATIENTS

1. After patients are screened by PFS, patients will wait in the Urgent Care Clinic waiting room until a Registered Nurse is available for Intake.
2. Once a Registered Nurse becomes available, the Registered Nurse will bring the patient into the room to perform an Intake Assessment.
3. Once the intake is complete, the patient will go into an exam room to be seen by a provider. If there are no exam rooms available the patient will return to the Urgent Care Clinic waiting room and wait for an exam room to become available.
4. If the Registered Nurse determines that the patient needs a higher level of care during the intake process, the Registered Nurse will complete a new quick registration form using the same Urgent Care FIN number. The Urgent Care Registered Nurse will notify the Emergency Room Lead Nurse, or triage nurses, of the arrival of the patient. The patient will be escorted via wheelchair by a licensed staff under the discretion of the Registered Nurse.

V. CARDIAC PATIENTS

1. Patients presenting to the Urgent Care Clinic with chest pain or shortness of breath suggestive of ischemia will bypass the Urgent Care Clinic registration process and will be immediately escorted to the Emergency Department to be triaged. The patient will be formally registered in the Emergency Department by the ED Quick Registration

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Nurse.

2. If a patient is determined to have a cardiac issue by a Registered Nurse during the intake process, the Urgent Care Clinic Registered Nurse will stop the intake process and immediately escort the patient to the Emergency Department 1A to receive proper cardiac care. The patient will be formally registered in the Emergency Department.

VI. OBSTETRICAL PATIENTS

1. All pregnant patients presenting to the Urgent Care Clinic with any obstetrical complaint whom are 14 weeks gestation or greater will be immediately directed or escorted to the Labor and Delivery department via wheelchair, depending on assessment.
2. Pregnant patients presenting to the Urgent Care Clinic with conditions unrelated to their pregnancy will be registered to the Urgent Care Clinic to receive medical care as appropriate.
3. Pregnant patients presenting to the Urgent Care Clinic who are less than 14 weeks gestation with conditions relating to their pregnancy will be directed to go to the Emergency Department. Patients will be escorted via wheelchair, depending on assessment.

VII. PSYCHIATRIC EMERGENCIES

1. All patients with a potential psychiatric emergency who present as a walk-in to the Urgent Care Clinic will be immediately escorted to the Psychiatric Emergency Room to be registered and receive proper treatment.
2. All patients with a potential psychiatric emergency and an “emergency medical condition” who present as a walk-in to the Urgent Care Clinic will be escorted to the Emergency Department 1A. The Emergency Room Team Leader will be notified of patient’s arrival to begin registration process and receive appropriate care.

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| References: | |
| Approved by: Georgia Foot'e-Sam (Clinical Nurse Director II), Lois Ramirez (Assistant Hospital Administrator), Oleg Melamed (Physician Specialist, M.D.) | Date: 07/13/2017 |
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