



Vice President and Chief Executive Officer of the Medical Center

MEDICAL CENTER POLICY NO. 0201

- A. SUBJECT: Patient Identification
- B. EFFECTIVE DATE: October 1, 2011 (R)
- C. POLICY:

All persons who provide healthcare services at the Medical Center and all Medical Center employees who have direct interactions with Medical Center patients shall ensure that accurate patient identification is continuously maintained. The registration and admission processes shall require verification of patient-specific information for accurate patient identification. A unique and permanent medical record number shall be assigned to each patient upon verification of required patient identifying information.

Standardized procedures throughout the Medical Center shall be required and maintained for:

- Identification and verification of patients,
- Changes to patient identifying information,
- Alias assignment (situations in which access to the identity of a patient has been secured), and
- Medical record number registration for traumas (situations in which a patient's identity is unknown and the patient requires immediate care) and disasters (situations in which the disaster plan is in place).

D. PROCEDURES:

1. The patient registration and admission processes shall require verification of patient-specific information for accurate patient entry into the master patient index and to ensure selection of the correct patient at time of subsequent registrations and admissions. This shall include use of a valid form of identification (i.e., photo driver's license, state issued photo ID card, etc.) or active involvement of the patient or, when appropriate, family or caregiver, to confirm the spelling of name, sex and date of birth.
2. Patient Identification:
 - a. All persons who provide healthcare services directly to a patient shall verify identification of the patient. Verification shall be performed through means appropriate for the situation (e.g., verbal identification from patient, family, or patient's caregiver; Medical Center patient identification band; written verification *via* driver's license).

(SUBJECT: Patient Identification)

Healthcare providers shall verify at least two patient identifiers whenever

- administering medications or blood products,
- collecting blood specimens and other specimens for clinical testing,
- providing other treatments and procedures.

The two required identifiers are the patient's name and date of birth which shall be used whenever available. Healthcare providers shall verify a patient's identity by asking the patient to state his/her name and date of birth, which are compared to the information on the patient's ID band, driver's license or information in the patient record.

At least one additional identifier may be used from the following in cases where more than one patient has the same name and date of birth:

- medical record number, or
- account number

- b. When collecting samples for clinical testing, the specimen containers shall be labeled in the presence of the patient to ensure proper patient and specimen identification. Do not pre-label specimen containers.
- c. A patient identification (ID) band shall be placed securely on all patients who are admitted to a Medical Center bed or who are registered as a patient in the Emergency Department. A patient ID band shall also be placed on all ambulatory patients who receive moderate or deep sedation/analgesia. For patients under the age of 31 days, two identification bands are required to be securely placed at all times. The ID band shall include, at the minimum, patient name (first and last) and medical record number. Changes to the name or medical record number may only be made through a centralized process in Health Information Services (HIS).
- d. A patient's ID band shall remain intact until the patient has been released from the Medical Center. If it is necessary to remove an ID band, the individual removing the band shall replace the band and verify the accuracy of the replacement band. In the event that a patient's ID band is missing or that the existing band is not legible or contains incorrect information, the individual making such a discovery shall notify the patient's assigned healthcare provider. Upon notification, the assigned healthcare provider shall take immediate steps to ensure that the patient is given an accurate ID band. The new ID band information shall be verified for accuracy prior to placement on the patient's extremity. A Quality Report describing any such incident shall be completed and submitted.
- e. If a patient is admitted directly to a patient care unit from another facility, the healthcare provider assigned to the patient (or his/her designee) shall replace the patient's ID band from the referring facility with a Medical Center ID band after verifying the accuracy of the replacement band.
- f. All persons who provide healthcare services or patient access (registration/admitting) services to inpatients and to designated procedure areas shall be knowledgeable about the policies and procedures for applying and replacing the ID band.

(SUBJECT: Patient Identification)

- g. For patients being cared for in settings where ID bands are not used, the requirement for use of two patient identifiers as specified in D.2.a. above still applies.
- h. In the event there are two or more patients in the same unit with similar names, extra precautions shall be taken to alert unit personnel to this situation. An orange Name Alert must be placed on each patient's name label on his/her medical record and on the door tag outside the patient room.

Unless absolutely unavoidable, the same healthcare provider should not care for two or more patients with similar names.

3. Changes to Patient Identifying Information:

- a. Requests to change/correct patient identifying information shall be directed through Registration or HIS Staff. Corrections to a patient's name, date of birth, sex, or social security number or revisions of legal names shall require appropriate documents for processing.

Valid forms of documentation include, but are not limited to:

- Photo driver's license
 - Certificate of marriage
 - Adoption certificate
 - Birth certificate
 - State issued photo ID card
 - Court document stating what the name was and what the name is now.
- b. If valid documentation cannot be produced, a Patient Care Manager or Service Area Manager may request changes to patient identifiers to prevent delay that could compromise patient care. Authorization will be subject to subsequent verification.
 - c. Registration staff shall forward requests for patient identifier changes with appropriate documentation to HIS:
 - Fax to (434) 243-9245
 - Page the HIS Supervisor on Call (pager # 923-5121) for revisions required during third shift hours for an inpatient or outpatient in a bed, if delaying the revisions until dayshift could compromise patient care.
 - d. In the event that erroneous patient identifying information has been selected or created for a patient during the registration process, the individual discovering the error shall immediately notify HIS for corrections to be made. A Quality Report describing any such incident shall be completed and submitted. In the event that erroneous patient identifying information has been selected or created for a patient during the registration process, the individual discovering the error shall immediately notify HIS for corrections to be made. A Quality Report describing any such incident shall be completed and submitted. If the patient has been erroneously identified during the current admission, the HIS Administrator (or designee) and the Administrator On Call shall jointly require the patient to be

(SUBJECT: Patient Identification)

discharged under the erroneous medical record number and readmitted under a new or correct medical record number.

- e. HIS shall be responsible for revisions in the Medical Center Patient Information System, A2K3.
 - f. HIS shall directly notify the following departments regarding changes to patient identifiers or merging of medical record numbers: Admitting, Blood Bank, Heart Center Computing, Medical Laboratory Computing, Patient Financial Services, Pharmacy, Radiation Oncology, Radiology, ED, OR Information Systems, and the unit charge nurse (admitted patients). In the event that a laboratory specimen referred to Blood Bank has already been tested for Type and Hold for blood product crossmatch, the Blood Bank shall notify the patient's physician or healthcare provider that a new specimen and a new test request bearing the correct patient identifying information must be submitted.
 - g. HIS shall notify the individual requesting the patient identifying information change and unit/department staff where the patient is located when the transaction is complete.
 - h. The charge nurse, or his/her designee, on the patient's unit shall make changes to appropriate on-site items, such as ID band and other patient-related materials used on the unit.
4. Alias Assignment

An alias may be assigned to a patient to enhance the privacy and security of the patient's identity and to communicate necessary information to those responsible for patient care and registration. Assignment of an alias requires approval as follows:

- a. Admitting staff or healthcare provider shall determine the need to secure a patient's identity and contact the Chief Nursing Officer or PCS Administrator-on-Call to request approval to assign an alias.
- b. Assignment of an alias (except in instances involving closed adoptions) shall be based on the degree to which the level of risk to the patient or the Medical Center outweighs the risk of patient misidentification.
- c. All approved requests to assign an alias to a patient with an existing University of Virginia medical record number shall be directed to Health Information Services for processing. HIS staff shall enter the alias name in A2K3 using the established medical record number. If the patient is new to the Medical Center (e.g., does not have an existing University of Virginia medical record number), Registration Staff may process the assignment of an approved alias to the patient using the newly established medical record number. Registration staff shall immediately notify HIS of such action.
- d. If the registration process has been completed prior to approval to assign an alias, registration staff shall contact HIS and follow procedures described above for changing patient identifying information.

(SUBJECT: Patient Identification)

- e. HIS is responsible for changing the alias name back to the patient's correct name in A2K3 upon discharge.
 - f. Admitting staff shall be responsible for ensuring all billing documents are under the patient's correct name.
5. Medical Record Number Registration for Traumas and Disasters

Trauma and disaster numbers are pre-determined 7-digit medical record numbers that may be registered to medical or surgical patients requiring immediate medical/surgical care upon arrival to stabilize their life-threatening condition. A trauma or disaster number may be registered to a patient in situations in which critical aspects of care cannot be delayed to employ the routine registration process, or for patients whose identity is unobtainable when presenting for medical evaluation and care.

- a. The Emergency Department and Operating Room healthcare providers shall establish the need for a trauma or disaster number and notify ED registration or Admitting staff to initiate a trauma or disaster number.
- b. Once the patient has been fully identified, registration or unit personnel must contact HIS with the patient information. HIS shall initiate procedures for correcting patient identifiers.
- c. If the patient has not been seen previously within the University of Virginia Medical Center, the trauma or disaster number shall be retained as the permanent medical record.
- d. If the trauma or disaster patient has an existing medical record number, HIS shall advise the Emergency Department Registration staff or Patient Care unit staff and the Blood Bank of the existing medical record number. Emergency Department Registration Staff or Patient Care Unit Staff is responsible for documenting the patient's existing medical record number on the patient's MIS face sheet.
- e. HIS shall merge the medical record numbers upon patient discharge.

SIGNATURE:



R. Edward Howell, CEO, UVA Medical Center



DATE:

(SUBJECT: Patient Identification)

Medical Center Policy No. 0201 (R)

Approved March 1999

Revised June 1999, December 2001, March 2003, June 2006, December 2009, September 2011

Approved by Chief Nursing Officer

Approved by Medical Center Administration