

ADT Patient Status Changes

Status Change Scripts

Observation to Inpatient - Retroactive

This is for changing an Observation patient to a full Inpatient admission back to the time of admission (UR or error on admission tells staff to make this change).

Note: This can only be done while the patient is still admitted and cannot be altered once patient is discharged.

1. The Utilization Review staff convenes a UR meeting and discusses the case.
2. The UR nurse writes a Utilization Review note in using the Utilization Review Criteria template stating that the UR committee met and records their meeting results in the medical record. The note is signed by the UR nurse, UR physician, and the attending physician if the attending agrees.
3. If the attending agrees, the attending will document and sign the UR Physician Statement note using that template.
4. The attending then writes an Admit Order for this admission change in the EHR. Do not use a delayed order.
5. Make full admit from time of initial Observation admit. This should be documented on the Admit order under diagnosis.
6. The HUC or other designated staff changes the admission type.
7. In RPMS, go to ADT, Bed Control (BC), Extended Bed Control (EBC).
8. Type in the chart number or patient name for the patient whose admission needs to be edited.
9. Choose the admission to edit.
10. Select Option 1 and choose "Admit a patient."
11. Select the date and time of the observation admission for patient as the admitting time.
12. Answer the questions as you normally would except Treating Specialty.
13. Choose the new Treating Specialty (regular admission rather than Observation).
14. Reprint the A sheet and place it in the record as usual.
15. Leave the original order for Observation active.
16. Correct the census worksheet on the floor.
17. Contact HIMS Analyst and Registration to let them know of the change.

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Observation to Inpatient – Status Changes

This is for changing patient status from OBV to INPT when the patient's condition has changed to warrant the change in admission status.

1. The physician selects delayed order for Admission and writes a new admission order.
2. The physician writes an active Discharge order (for the Observation portion of the stay).
3. The physician writes or dictates a history and physical (unless already done on Observation stay- in this case, the physician shall do a progress note stating the reason for the status change).
4. In ADT, the HUC or designee discharges the patient from Observation and admits the patient to Inpatient one minute later (and HUC or designee MUST wait at least one minute or all med orders will be discontinued.).
5. Must choose option: "Will this patient be immediately readmitted?" Choose yes.

Inpatient to Swing Bed – Status Changes

This is for changing a patient from INPT to Swing Bed Status. Patient's condition changed to warrant the change in admission status.

1. The physician clicks on delayed orders and writes an admission order to swing bed and new orders for the admission.
2. The physician writes an active discharge order from acute care.
3. The physician writes a discharge summary for the acute care admission and writes an addendum to the original history and physical for the swing bed admission.
4. The UR nurse completes the Long Term Care form.
5. In ADT, the HUC or designee discharges the patient from the original service and readmits the patient one minute later to Swing Bed admission.