

SUBJECT: SCOPE OF PRACTICE - MEDICAL ASSISTANTS	REFERENCE #10043
	PAGE: 1 OF: 2
DEPARTMENT: NURSING	EFFECTIVE:
APPROVED BY:	REVISED:

POLICY:

- Assisting with exams, invasive procedures and minor surgeries that are carried out by practitioners.
- Taking messages only - not triaging. Triaging is the screening and classification of ill or injured patients in order to determine their medical needs. It is the responsibility of the Registered Nurse or physician to determine priorities.
- Scheduling appointments and surgeries.
- Preparing charts.
- Obtaining consents.
- Answering phones.
- Ordering supplies.
- Cleaning and sterilizing supplies, rooms and equipment.
- Taking patient vital signs, heights, weights, and head circumferences.
- Preparing patients for examination or procedures including positioning, draping, shaving and disinfecting treatment sites.
- Applying basic dressings. Basic or simple dressings only include the application of ointment, telfa, 4 x 4s and kling to minor wounds.
- Assistant can remove the old dressing and reapply the new one (if appropriate) but only after the physician has made the assessment.
- Measuring for crutches and crutch teaching.
- Collecting and labeling urine/stool specimens.

SUBJECT: PATIENT INSTRUCTION IN ADMINISTRATION OF SUBCUTANEOUS INJECTIONS	REFERENCE #10516
	PAGE: 1 OF: 3
DEPARTMENT: NURSING	EFFECTIVE:
APPROVED BY:	REVISED:

EQUIPMENT:

- 10 cc vial of normal saline
- Vial of prescribed medication
- Appropriate size syringes with 25-27 gauge needles
- Alcohol swabs
- Square 6 x 6 inch injection pad

PROCEDURE:

- Prior to scheduling a patient make certain that referring physician has obtained an authorization for above medications. Obtain a written prescription.
- Wash hands and have patient wash his/her hands.
- Assemble equipment on clean surface.
- Have patient remove syringe from package and familiarize patient with syringe, needle, needle cap, cc markings and plunger.
- Have patient pull back on the plunger and draw up the same volume of air as volume of prescribed medication into the syringe.
- Have patient remove the colored cap from the 10 cc vial of normal saline. (The patient will practice the entire procedure with normal saline before drawing up the prescribed medication.)
- Have patient clean the rubber stopper with an alcohol wipe.
- Have patient pull needle cover straight off of syringe.
- While keeping the vial on a flat surface, have patient put the needle straight through the rubber stopper.

SUBJECT: REPORTING PATIENT ABUSE - ADULT	REFERENCE #10023
DEPARTMENT: NURSING	PAGE: 1 OF: 2
APPROVED BY:	EFFECTIVE:
	REVISED:

POLICY:

- Employees of healthcare facilities must report abuse of clients when the employee knows that such abuse has occurred and abuse that is manifested in a physical injury and/or neglect. This includes dependent adults, elder, spousal or partner abuse.
- “Dependent adult” means any person residing in this state, over the age of 18, who has physical or mental limitations which restrict his or her ability to carry out normal activities or to protect his or her rights, including, but not limited to, persons who have physical or developmental disabilities, or whose physical or mental abilities have diminished because of age.
- Report any abuse or suspected abuse of dependent adults to the Adult Protective Services by phone. Report other cases of abuse to appropriate authorities. Document in the patient record that the call was placed. A written report must follow within two working days.
- Signs/Symptoms of Physical Abuse:
 - Physical indications of abuse occur more commonly in clusters of symptoms than as a single symptom. Assess for the presence of two or more of the following:
 - Bruises
 - Welts
 - Lacerations
 - Puncture wounds
 - Dehydration
 - Malnutrition
 - Fractures
 - Signs of overmedication
 - Burns
 - Poor hygiene
 - Lack of needed medical attention
 - Multiple injuries in various stages of healing

SUBJECT: EXPOSURE CONTROL PLAN	REFERENCE #40211
DEPARTMENT: INFECTION CONTROL	PAGE: 1 OF: 3
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

- The purpose of the Exposure Control Plan is to identify workers who are at risk or are potentially at risk for occupational exposure to blood or other potentially infectious materials and therefore are at risk for exposure to HIV and HBV.
- This plan will be made available to all employees upon hire. A copy is included in the Employee Health Policies and reviewed with all employees on an annual basis at least.
- Exposure Determination:
 - Job Classifications in which all employees have occupational exposure:
 - Nursing personnel
 - Physicians
 - Respiratory Therapy personnel
 - Radiology/Nuclear Medicine personnel
 - Central Services
 - Laboratory
 - Job Classifications in which some employees have occupational exposure:
 - Housekeeping personnel
 - Pharmacy personnel
 - Transporters
 - Physical Therapy
 - Occupational Therapists
 - Job Classifications in which there is little Chance of Exposure:
 - Plant Operations personnel

SUBJECT: PHARMACEUTICALS	REFERENCE #20804
DEPARTMENT: URGENT CARE	PAGE: 1 OF: 2
	EFFECTIVE:
APPROVED BY:	REVISED:

POLICY:

- Storage of Drugs:
 - Drug containers which are cracked, soiled or without secure closures shall not be used.
 - All areas where drugs are stored must be kept dry, clean and neat at all times.
 - Drugs shall be stored in an orderly manner in specifically designated cupboards, cabinets, closets or drawers away from public access or locked to prevent unauthorized access to drugs, including sample medications.
 - Refrigerators containing drugs shall be maintained between 2 and 8 degrees C (36 and 46 degrees F). Room temperature for drug storage shall not exceed 30 degrees C (86 degrees F). Refrigerators used for drug storage must not contain food items. Freezers shall be maintained -4 to 14 degrees F.
 - A daily log of temperatures shall be kept.
 - Narcotics shall be double locked and there will be a sign-out log. Narcotics are counted daily and keys will be restricted to licensed personnel.
 - Drugs for external use in liquid, tablet, capsule or powder form shall be stored separately from drugs for internal use.
 - Test reagents, germicides, disinfectants and other household substances shall be stored separately from drugs.
 - Drugs shall not be kept in stock after the expiration date on the label. No contaminated or deteriorated drugs shall be used.
 - Drugs shall be checked monthly as well as each time a medication is dispensed for outdates. Monthly checks of sample drugs shall be included.
 - Multidose vials of injectable medications are to be dated and initialed when opened. The vials shall be destroyed when expired (per manufacturer). Drugs used for local anesthesia shall be single use vials.
 - All single dose vials or vials without preservatives must be discarded at time of use and not reserved for further use.