BERKSHIRE MEDICAL CENTER
POLICY

TITLE: PE.A.4 - PATIENT IDENTIFICATION

PURPOSE: Berkshire Medical Center, Hillcrest and Satellite Emergency Facility will ensure that all patients are properly identified prior to any care, treatment or services provided. Exception: Patients unable to provide identifying information, who experience conditions requiring emergency care will receive treatment prior to identification if such care and treatment is necessary to stabilize the patient's condition (example: “Doe patients” unidentified patient arriving comatose to the Emergency Department).

APPLICABILITY: All employees, including physicians, providing care or services to patients.

SPECIFICS:

I. A system for positive identification of all hospital patients fulfills six (6) basic functions:

   A. Provides positive identification of patients from the time of admittance or acceptance for procedure/service.

   B. This identification system shall apply to patients in all areas of the healthcare system.

   C. Provides positive patient identification with barcoding technology when supplying medication and medical supplies.

      i. Barcoding technology will always be used when available.

   D. Provides a positive method of linking patients to their medical records and treatment.

   E. Minimizes the possibility that identifying data can be lost or transferred from one patient to another.

   F. Improves the accuracy of patient identification.

   G. The staff person must ask the patient to verbalize two identifiers (first and last name and date of birth). Do not state the patient’s information and ask them to confirm. If the patient cannot verbalize this information, ask for identification/insurance cards to validate this information.
II. The identification band will include the patient's first and last name, hospital account number, medical record number, date of birth, age, sex, attending physician, date of admission (or acceptance for procedure/service) and service/location.

   A. Patient identification bands should be affixed to the patient's wrist or ankle unless physical conditions preclude attachment to the patient, i.e. extreme trauma to limbs.

   B. When a patient has their identification band attached:

      i. Any other identification band will be removed prior to attaching the current band.
      ii. **Two identifiers** will be used to verify the right band is on the right patient.

**PATIENT IDENTIFICATION POLICY:**

I. The staff person must ask the patient to verbalize two identifiers (first and last name and date of birth). Do not state the patient’s information and ask them to confirm. If the patient cannot verbalize this information, ask for identification/insurance cards to validate this information.

II. Each staff person should explain to patients the reason Berkshire Medical Center is committed to asking for two identifiers when providing care, treatment and services. We want to assure patient safety.

As an example: "My name is John; I’m a nurse here at Berkshire Medical Center and I will be taking over your care for this shift. I just want you to know, all staff providing care for you during your stay will also be asking you to state your first and last name and date of birth. The doctor has ordered some blood work for you and it's important, for your safety, that I make sure I have the correct patient. Can you please tell me your first and last name and birthday? I understand this may be frustrating for you; however we do this to ensure that we always provide you with the correct treatment and to ensure your safety. If any of our staff or myself forgets to ask you this important information, please remind us."

III. Acute Care Services

   A. A tamper resistant, nontransferable identification band shall be prepared and affixed to the patient by:

      • Access Services – Inpatients and Emergency Department patients

      • Ambulatory Surgery Center Staff – all Ambulatory Surgery and Endoscopy patients
• Emergency Department and Satellite Emergency Facility – the patient has an identification band prepared as soon as patient information is available.

B. Access Services will confirm identification and attach the identification band for all patients interviewed. Any old identification bands will be removed first.

C. For patients brought directly in the treatment area, Access Services registration staff will produce the band. If unable to attach band, Access Services registration Staff will give the identification band to nursing staff that are then responsible for confirming the patient's identification, removing any old identification bands, and placing the new identification band on the patient.

D. If the Emergency Department patient is converted to inpatient status, the patient will have a hospital identification band printed on the nursing unit. The nurse caring for the patient is responsible for identifying the patient and replacing the Emergency Department identification band with the new identification band.

E. Anyone removing the identification band is responsible for replacement prior to the patient leaving his or her care; i.e. anesthesia removing in surgery will replace prior to leaving the operating room.

IV. “Doe” Patients

A. **DO NOT REMOVE** the identification band from "Doe" patients.

B. For "Doe" patients admitted to the hospital from the Emergency Department or Satellite Emergency Facility, both the hospital identification band and "Doe" identification bands will remain on the patient for their entire hospitalization to facilitate giving blood based on the "Doe" type and cross blood sample.

V. Admission to Acute Care Services

A. The patient will have their identification band attached and verbally verified using **two identifiers** by the nurse. This will be documented as complete in the Nursing Admission Intervention.

VI. Prior to any procedure/ service

A. The staff person must ask the patient to verbalize two identifiers (first and last name and date of birth). Do not state the patient's information and ask
them to confirm. If the patient cannot verbalize this information, ask for identification/insurance cards to validate this information.

B. Before any procedure or service is carried out, the identification band shall be on the patient and will be checked by the responsible care provider for the following two identifiers to ensure that the right patient is involved:

- Patient first and last name
- Patient date of birth

C. If the patient's date of birth is not available, the second identifier will become the patient's medical record number to be checked against the patient's order.

D. For those patients unable to identify themselves, staff should compare both of these identifiers on the bracelet to what is on the MAR, label requisition, etc.

E. Patient identification must be confirmed using the two-identifier system prior to conducting any healthcare procedures. Procedures may include, but are not limited to: administration of medication, transfusion of blood or blood components, obtaining blood or other specimens from the patient, performing a treatment and performing a diagnostic test (i.e., diagnostic radiographic study).

F. No procedure shall be conducted when the patient's identity cannot be verified because the imprinted band is illegible or missing except in emergent situations. Staff must use the two identifier system when replacing the band.

G. Defective or missing bands shall be replaced immediately with new bands.

H. Each healthcare provider conducting assessments on the patient shall include a check of the patient's identification band to assure the band is present and legible, as a routine component of the patient assessment process.

I. The patient shall be wearing the band when he/she is discharged. In the event of death, the band shall remain on the patient's body.

VII. Outpatient Services/Physician’s Practices

A. When there is no identification band for outpatient services, reconcile this information to the patient's order for diagnostic examination or therapeutic service/procedure and the two-identifiers will be verbally assessed from the following:
• Patient first and last name
• Date of birth
• Social security number (last four digits)
• Address (only if patient is refusing date of birth and social security number)

B. Verify the patient's first and last name and date of birth with the accompanying person, paperwork, identification card, or, if applicable, contact the sending facility to verify the applicable information.

VIII. Maternal Child Services

A. The mother will be identified for any procedures/services as identified in the Acute Care Service section of this policy.

B. The infants will be identified for any procedure/service using the Mother's name; Infant's first and last name and band number from the IDENT-A-BAND documentation record in the Infant's chart and reconcile this information to the Infant's identification band on the ankle.

IX. Blood Bank Services

In order to ensure the correct specimens are sent for Blood Bank testing, it is imperative that the patient be identified in such a manner that it is impossible for them to be confused with another patient. It is vitally important that identifiers be in place so that blood can be administered to the intended recipient. These identifiers when in place allow the Blood Bank to utilize previous records. Please see PC.A.2.1 – Administration of Blood and Blood Components.

A. Inpatients:

• **Two-identifiers** must be present on the:
  
  a. Patients' wristband
  
  b. Patients' specimen label
  
  c. Bag tags attached to any cross-matched units of blood allocated for the patient.

• The acceptable identifiers are the
  
  a. Patients’ first and last name
  
  b. A valid hospital number. (For Blood Bank purposes this is deemed to be the medical record number). For continuity,
**trauma patients** will continue to use the trauma band even if another band is present.

**B. Procedure for Drawing Type and Screens**

All type and screens (in all areas) will be done with two people present. Exception to this procedure will be type and screens drawn as part of a prenatal package.

- **When Mobilab is used;**
  
  a. Two people will be present to identify the patient first and last name and medical record number with the label to be placed on the pink blood tube in the presence of the patient.

    - One person will be logged in and the label will print with employee’s first and last name, which will attach to the tube.
    - The second person will initial and write their employee number on the tube and be legible.

- **When Mobilab is not available;**
  
  a. Two people will be present to identify the patient first and last name and medical record number with the label to be placed on the pink blood tube in the presence of the patient.

    - Both people must place their initials and employee number on the tube and be legible.

- **Staff**
  
  a. For Inpatients the Laboratory phlebotomist plus a licensed health care provider can confirm the two patient identifiers.

    - The ultimate responsibility for the phlebotomy will lie with the phlebotomist.

  b. If it is a nurse draw, the process can involve two RNs or an RN and a licensed health care provider.

  c. All type and screens in the Emergency Department (ED) and Satellite Emergency Facility (SEF) will be done with two people present at the bedside.
• When blood is drawn in the field, the EMS worker who draws the blood will keep the tubes in their possession until arrival to the Emergency Department or Satellite Emergency Facility.
• When the patient arrives in the ED and SEF, the licensed provider and EMS will identify the patient to the name band and then label the individual tubes at the bedside.

C. Outpatients

• Non transfusion situations; i.e. prenatal testing. (As these patients do not have wristbands). The following identifiers are acceptable on any patient specimen:
  • Patient’s first and last name
  • Date of birth

• Transfusion situations; from Nursing Homes or Doctors’ Offices;
  a. Specimens will not be accepted for use in pre-transfusion testing
  b. The patient will have the blood work drawn upon admission/arrival for treatment

Note: Any questions regarding specimen collection, contact the Blood Bank Manager at 447-2581 or 447-2569

X. Remote Order Entry

A. Prior to entering the order, the following should be checked:
  • Patient’s first and last name
  • Date of birth
  • Location

B. Prior to submitting the order, these should be checked again.

XI. Episode Selection

A. When performing a Patient Search in Meditech, the top selection in the account listing is not always the current episode. Therefore when selecting an episode, it is necessary to verify the following:
  • Patient’s first and last name
• Date of service or Account Number

XII. Disciplinary Actions

A. Please refer to policy BHSP 104 Corrective Action Policy.

B. Physicians will be referred to the Chief of Staff and Department Chair/Chief through a Quality Tracking Form.
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<td><strong>EFFECTIVE:</strong></td>
<td>February 1, 2016</td>
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<td><strong>REPLACES:</strong></td>
<td>BMCP PE.A.4 - PATIENT IDENTIFICATION of April 30, 2014</td>
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<td><strong>REVIEWED BY:</strong></td>
<td>Donna Virgilio, Manager, Access Services</td>
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<td></td>
<td>Jessica D. Krochmal, MD</td>
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<td>Director of Blood Bank</td>
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<td>Multidisciplinary RCA Team</td>
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<tr>
<td><strong>PREPARED BY:</strong></td>
<td>Multidisciplinary group of many departments at Berkshire Medical Center</td>
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