**MSN Capstone Virtual**

 **American General Hospital**

**Admission Policy**

**Policy**

Patients may be admitted to an in-patient unit from a variety of sources, including the Emergency Room, Operating Room, or direct admissions from primary care or specialty clinics. Admissions need to be coordinated through the Admissions Department and may be impacted by bed-availability.

**Procedure**

Referring physician initiates the process with the decision the patient needs to be admitted. The physician or designated, qualified person contacts the Admissions Department with patient name and relative personal information, patient diagnosis, and screening or brief history to justify the need for admission. Insurance information should also be shared with Admissions as soon as it is available.

Collaborate with the units’ covering physician and charge nurse to determine unit capacity to manage admission. Referring physician should provide SBAR report to the unit and indicate approval for admission.

The Admissions’ team member will complete registration and confirm insurance information with the patient and with the insurance company. If unable to obtain insurance coverage approvals prior to admission (for example, in the case of an emergency admittance), the Admissions’ team will continue to work on it until resolved. (See detailed decision-making tree in Admissions Policy Manual\*)

The Admissions’ team member will assure documents are signed and/or declined by the patient or guardian, including the admission form, acknowledgement of patient rights, emergency contact, healthcare proxy, Living will or advanced directives, other legal documents when applicable, such as power of attorney, DNR, and organ donor.

Covering physician/nurse practitioner will assess and write admission orders (See policy on Admission documentation\*)

\*Admissions Policy Manual and the Policy on documentation are assumptive and not available. For this project, assume standard elements for admission orders.