**HEaRT-NUR: American General Hospital**

**In-Patient Use of Hospital Equipment Policy**

**Policy**

The physician, nurse practitioner, therapist, or nurse may identify a patient need for use of equipment for patient care. Orders must be prescribed by a qualified prescriber and follow ICD-10 coding. Equipment orders must be recorded in the patient’s medical record prior to implementation.

Equipment includes, but is not limited to rolling walkers, axillary crutches, straight canes, commodes, tub seats, and other assistive devices for ADLs, plus Hoyer lifts, compression devices, monitoring devices, and other medical equipment.

**Procedure**

The physician or other care provider may assess patient need for medical equipment while in-patient. The physician must authorize and order equipment use. Justification of need must be included in the order.

They physician is responsible for identifying the ICD-10 coding and for maintaining training on Medicare standards and requirements.

Patients requiring assistive devices must have instruction by a therapist or qualified nurse. Patients must be supervised during equipment use until assessment that determines the patient is safe for independent use. This assessment needs to be documented in the medical record.

Personal equipment should not be shared between patients. For equipment no longer needed by a patient, appropriate cleaning and infection control measures will be followed. Cleaning procedures may vary based on the specific equipment (such as monitors). Each equipment that requires specific cleaning protocols will be marked. Refer to list in employee folder under equipment maintenance policies via the hospital’s intranet.

Non-disposable equipment may not be sent home with patients being discharged.