



Capital Health

## ADMINISTRATIVE MANUAL

### Policy and Procedure

<b>TITLE:</b> Unidentified Patient	<b>NUMBER:</b> CH 07-041
<b>Date Issued:</b> April 2013	<b>Page</b> 1 of 7
<b>Applies To:</b> Patient Registration Areas in Capital Health	

#### POLICY

1. Unidentified patients admitted to a Capital Health Emergency Department are issued a uniquely assigned name and medical record number (MRN) to provide interim identification for patients requiring care until positive identification is made. All reconciliation of diagnostic tests and cross matches of blood are to be complete before any changes to the record have been made.
2. Upon positive identification of a patient, the armband with the unique “unknown” name and MRN, along with an armband displaying the corrected /updated name, MRN and identified health card number remains on the patient for identification.
  - 2.1. Unidentified patients discharged from one Capital Health facility and sent to another facility will maintain their unique MRN identification from the originating facility until positive identification is obtained.
3. Emergency Departments at each site are to maintain an adequate supply of unidentified patient packets.

#### DEFINITIONS

- CSS:** Customer Service Specialist –HIS
- DPC:** Data Processing Clerk
- EDIS:** Emergency Department Information System
- Facility:**
- Queen Elizabeth II Health Sciences Centre (QEII)
  - Hants Community Hospital (HCH),
  - Cobequid Community Health Centre (CCHC),

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- Twin Oaks Memorial Hospital (TOMH),
- Musquodoboit Valley Memorial Hospital (MVMH),
- Eastern Shore Memorial Hospital (ESMH),
- Dartmouth General Hospital (DGH),
- Nova Scotia Hospital (NSH),
- East Coast Forensics Hospital (ECFH)

**eHealth**                      Electronic Health Information Services

**MPI:**                         Master Patient Index

**MRN:**                      Medical Record Number

**ODS:**                      Day Surgery

## PROCEDURE

### 1. The Identification of Patients

- 1.1. When a patient is brought to the Emergency Department without any identification and is not able to self-identify, the nurse or designate:
  - 1.1.1. searches the belongings for identification information
  - 1.1.2. determines the patient is unknown
  - 1.1.3. pulls the appropriate unidentified packet - male or female.
  - 1.1.4. registration clerk registers the patient using a gender based packet.
- 1.2. If the patient is unwilling to self-identify the nurse or designate
  - 1.2.1. determines the patient is unknown
  - 1.2.2. pulls the appropriate unidentified packet - male or female.
- 1.3. The registration clerk registers the patient using the gender based packet.
- 1.4. The clerk registers the patient in STAR using Quick Emergency Admission (**Appendix A**) to register the visit date in the Master Patient Index (STAR).

**Note:** The Quick Emergency Admission Codes are used strictly for unidentified patients.
- 1.5. The clerk places the white armband on the patient (red armband if information on allergies is found).
- 1.6. Departmental employees and the police liaise as necessary to properly identify the patient as per policy *Interacting with Law Enforcement Agencies* CH 30-065.
  - 1.6.1. For ECFH, Correctional employees and the sheriff liaise as necessary to properly identify the patient as per *policy Interacting with Law Enforcement Agencies* CH 30-065.

#### 1.7. Once the patient has been identified:

- 1.7.1. The nurse or delegate notifies the police of the identification of patient as necessary.

- 1.7.2. The registration clerk completes an MPI search in STAR for previous MRN.
- 1.7.3. If the patient has allergies, the nurse places a red armband on the patient (if not previously done as per **Procedure #1.5**)

## 2. If the Patient has a Previously Assigned Medical Record Number:

### 2.1. The Registration clerk:

- 2.1.1. **Does not re-register the patient.**
- 2.1.2. Changes the Quick Emergency Registration to a regular Emergency Registration using site specific code, revises the patient demographics, and updates the unidentified patient log.
- 2.1.3. Retains the unknown name in the MPI for future references.
- 2.1.4. Notifies eHealth Customer Service by faxing (473-4999) the *Unidentified Patient Update Form* (HIS030413).

### 2.2. eHealth Customer Service:

- 2.2.1. Notifies all auxiliary systems by faxing the “Unidentified Patient Update Form” that there are two medical record numbers for the same person, a provide medical record unit numbers.
- 2.2.2. Provide paper copies of old Medical Records charts if necessary.
- 2.2.3. Completes form CD1537MR, *Additional Patient Information* and faxes to appropriate area of care.
- 2.2.4. Scans completed form CD1537MR *Additional Patient Information* into HPF.
- 2.2.5. Notifies Data Integrity office by faxing the “Unidentified Patient Update Form”

### 2.3 The Registration clerk:

- 2.3.1 Continues documentation with the first Unidentified Unit number. Notifies the Healthcare Providers that previous medical information is located under another MRN.
- 2.3.2 Once the MRN numbers are merged:
  - 2.3.2.1 Reprints the emergency documents from STAR and/or EDIS; prepares new labels and armband(s).
  - 2.3.2.2 Attaches the updated documents to the “unknown” documents and place a new updated armband on the patient.

**DO NOT REMOVE THE UNIDENTIFIED ARMBAND**, as some diagnostics may have been ordered and it will be needed for correct identification

### 2.4 Data Integrity office

- 2.4.1 On the first business day the Data Integrity office checks with auxiliary systems to ensure any cross matching of blood, or orders made with the Unidentified Unit number is complete.

**Rationale:** This reduces the duplication of tests and/or spoilage of blood products.

- 2.4.2 The Data Integrity officer merges the two unit numbers so that the previous

unit number and visit history reside under the previous MRN.

- 2.6 If eHealth cannot perform the merge due to two active unit numbers, continue to use the unidentified unit number while the patient is in Emergency.
  - 2.7.1 Reprint the updated documents from STAR and/or EDIS with the identifying information on it and staple to the unknown documents.
  - 2.7.2 Place a second armband on the patient with the identifying information.
  - 2.7.3 eHealth merges the unit numbers 7 days later, when one of the unit number becomes inactive.

### 3 If the Patient Does Not have a Previously Assigned Medical Record Number

- 3.1 The registration clerk:
  - 3.1.1 Changes the Quick Emergency Registration to an Emergency Visit for own site, revises the demographics and retains the unknown name in the MPI for future references.
  - 3.1.2 Prepares new labels and armband and applies label to appropriate documents.
  - 3.1.3 Places the new armband with the identified patient information on the patient.

**DO NOT REMOVE THE UNKNOWN ARMBARD**, some diagnostics may have been ordered and it will be needed for correct identification

### 4 Admission to an inpatient unit within the site

- 4.1 If the patient is to be admitted to an inpatient bed and the patient is still unidentified; continue to use the unknown patient MRN, name and DOB.

**Note:** The patient may have THREE armbands on (unidentified #, unidentified # with the updated name, DOB and HCN #, and a third one after the admission under a previous MRN #.) **All are necessary to identify the patient and any diagnostics that have been ordered.**

### 5 Patients transferring between Capital Health Facilities

- 5.1 When the patient is being transferred between Capital Health facilities and has not been identified, register the patient using the previous Unidentified MRN # from the sending facility. **Do not use a new unknown packet.**
- 5.2 Continue to attempt to identify the patient during admission until identification occurs.
- 5.3 Once the patient is identified refer back to **Procedure 1.1** – The Registration clerk does a complete MPI search in STAR for previous MRN – continue to **Procedure 1.7**.
- 5.4 If a patient was originally unidentified and the MRNs:
  - 5.4.1 Have been merged, the originating facility's registration clerk dispositions the patient using the MRN after the merge
  - 5.4.2 Have *not* been merged, the originating facility's registration clerk dispositions the patient using the unidentified MRN.
- 5.5 If the patient has been identified and merged, register the patient using the merged

(previous) MRN #.

5.6 If the patient has been identified but a merge cannot take place, the receiving facility uses the previous MRN #, and *leaves all previous armbands on the patient.*

## 6 Patient Identification Notification to Ancillary Departments

6.1 When the patient has been identified, eHealth CSS:

6.1.1 Enters the unidentified data and positively identified data on the *Unidentified Patient Update Form (HIS030413)* and faxes it to the following areas prior to any revisions being entered into the Master Patient Index (MPI).

Department	Fax #
Blood Transfusion Services	473-4285
Pharmacy	473-7823
Radiology	473-1554
LIS Central Reporting	473-5566
Pathology Informatics	473-2100
STAR	473-2761

6.1.2 Retains the unidentified name in the Master Patient Index (MPI), so that it is known that this person came to and was initially treated at the Emergency Department as an unknown patient.

## 7 Unidentified Patient Expires in the Emergency Department

7.1 If the patient expires in Emergency, complete the disposition status in STAR indicating expired.

7.2 The nurse notifies the security, police and the medical examiner . (Refer to *Care of the Patient After Death CC 90-040* )

## 8 Transport of The Unidentified Patient direct to the Operating Room Via Helicopter

*Refer to District Heliport / Helipad Operation and Patient Transfer policy (CH 30-055)*

8.1 Register the patient prior to arrival with information provided by the Air Medical Transport Dispatcher.

8.2 The operating room charge person notifies Emergency Department of the expected patient (male or female),

8.3 The DPC registers the patient as an INP (Inpatient).

8.4 The OR staff logs the unit number and name into the OR waitlist book to be used by the Operating Room staff as needed (e.g.: blood products).

**Note:** Labels will be printed directly to the OR printer.

8.5 The charge nurse:

- 8.5.1 verifies the unit number and unknown name with the armband, health record and waitlist book in the Operating Room.
- 8.5.2 places the armband on the patient upon arrival in the Operating Room and gives the packet to the nurse involved in the patient case.
- 8.6 OR staff label all forms used in the Operating Room with the unidentified patient label only.
- 8.7 Upon completion of the case or cancellation of the operation, the Operating Room notifies the DPC in emergency to update the destination of the patient in STAR.
- 8.8 If the patient is identified, refer back to **Procedure #1.7**.

## RELATED DOCUMENTS

### Policies

- CH 30-055 District Heliport Helipad Operation and Patient Transfer
- CH 30-065 Interacting with Law Enforcement Agencies
- CC 90-040 Care of the Patient After Death

### Forms

- CD1110MR Unidentified Patient Description Sheet - Emergency Services
- CD1537MR Additional Patient Information
- HIS030413 Unidentified Patient Update form (uploaded as a Related Document with policy)

### Appendices

- Appendix A** Site Specific Codes and Contact Numbers

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**Appendix A**  
**Site Specific Codes and Contact Numbers**  
**ALL SITES WILL USE THE GENERIC DATE OF BIRTH OF 18850101**

<b>Capital Health Facility</b>	<b>Quick Emergency Admission Code</b>	<b>Unknown Name Format</b>
Cobequid Community Health Centre (CCHC)	CEQ	CCHC Male One or CCHC Female One
Dartmouth General Hospital (DGH)	DEQ	DGH Male One or DGH Female One
East Coast Forensics Hospital (ECFH)	FHQ	ECFH, Male one or ECFH, Female one
Eastern Shore Memorial Hospital (ESMH)	EEQ	ESMH, Male One or ESMH, Female One
Hants Community Hospital (HCH)	HEQ	HCH, Male One or HCH Female One
Musquodoboit Valley Memorial Hospital (MVMH)	MEQ	MVMH Male One or MVMH Female One
Queen Elizabeth II (QEII)	OEQ	QEII Male one, QEII Female one
Twin Oaks Memorial Hospital (TOMH)	TEQ	TOMH Male One or TOMH Female One
<p>Nova Scotia Hospital (NSH)  The Unidentified Policy is not applicable at the NSH, there is no Emergency Department on Site, and all Mental Health Patients must be medically cleared before being admitted, therefore would be treated in one of Capital Health Emergency departments first.</p>		