

# STAFF INSERVICE Licensed Independent Practitioners

Speaker(s):

Date:

Topics: All topics pertain to both the inpatient and outpatient settings

#### 1. Patient Education

- a. Education is coordinated among the disciplines providing care
- b. Lack of physician documentation regarding the disease process, meds and side effects
- c. The back of the form allows space for multiple disciplines to sign off on the same topic

#### 2. Medical Record Documentation

- Medical Record entries are dated, timed and the author identified either by printing the name under the signature, writing in the beeper number or stamping the entry
- b. The medical record contains sufficient information to support the diagnosis/condition and justify the care provided. If the note is illegible, this requirement is not met.
- c. "Do Not Use List" of abbreviations pertains to
  - i. Progress note entries
  - ii. All forms, especially the Med Rec form
  - iii. Prescriptions

### 3. Medication Reconciliation

- a. Forms are rarely complete, especially
  - i. Dose, route, frequency column
  - ii. "Continue" and "Do not continue" boxes
  - iii. Signatures from nurse, ED physician and admitting physician
  - iv. No evidence the list of meds was provided to the patient on D/C or to the next provider

## 4. Monitoring

a. The above "Requirements for Improvement" will be monitored via monthly concurrent chart reviews. Results will be reported to the respective department Chairs.