

**LONG ISLAND COLLEGE HOSPITAL
ADMINISTRATIVE POLICY AND PROCEDURE MANUAL**

	Manual Code: AD-122
SUBJECT: Patient Identification	
EFFECTIVE: January 2003	REVIEWED: 12/2006

Policy Statement:

To properly identify the correct patient prior to the performance of any care, treatment or services provided.

General Statement of Purpose:

It is the policy of Long Island College Hospital to ensure that all patients are properly identified prior to any care, treatment or services provided. This policy and procedure delineates the process for the identification of patients at Long Island College Hospital. It is the healthcare providers, attending physicians, residents, physician assistants, nurse practitioners, registered nurses and any other personnel providing care that are responsible for correctly identifying patient prior to initiating healthcare services, procedures or administration of medication. The patient's name and date of birth will be used for proper identification.

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: unidentified patient arriving comatose to the emergency department).

Principles of Identification:

This identification system shall apply to all areas in the hospital (i.e., Clinics, Radiology, Ambulatory Surgery) and fulfills four (4) basic functions:

1. Provides positive identification of patients from the time of admittance or acceptance for treatment.
2. Provides a positive method of linking patients to their medical record and treatment
3. Minimizes the possibility that identifying data can be lost or transferred from one patient to another.
4. Improves the accuracy of patient identification.

Patient Identification Procedures:

A tamperproof, nontransferable identification armband shall be prepared and affixed to the patient in the Emergency Department, Ambulatory Surgery areas or on the inpatient unit.

The identification armband will include the patient's full name, hospital account number, medical record number, date of birth, sex, and attending physician (all elements included on the addressograph).

If the patient is an Emergency Department admission, an Emergency Department identification armband will be prepared immediately upon triage and entry into the Emergency Department treatment area. The identification armband will be affixed to the patient and have the same identifiers as listed above.

If the Emergency Department patient is converted to inpatient status, the patient will have a hospital identification armband applied upon admission to an inpatient care unit, with the emergency department identification removed.

Before any procedure 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 insure that the correct patient is involved:

- **Patient name**
- **Patient date of birth or Medical Record number**

The healthcare provider will also verbally assess the patient, through active communication, to assure proper identification by asking the patient's name and date of birth and matching the verbal confirmation to the identification armband.

- If the patient is not able to state his/her name and date of birth, the healthcare provider will compare the patient identification armband with the medication administration record, order and or procedure requisition imprints to assure that name and date of birth matches.
- If the patient's date of birth is not available, the second identifier will become the Patient's **medical record number**.

Patient identification must be confirmed using the two-identifier system prior to conducting any procedures. Procedure may include but are not limited to: administration of medication, transfusion of blood or blood products, obtaining blood or other specimens from the patient, performing a treatment, performing a diagnostic test (i.e., diagnostic radiology study), distributing a diet tray and sending patients to another department.

- No procedure shall be conducted when the patient's identity cannot be verified because the imprint armband is illegible or missing.
- Defective or missing identification armbands shall be replaced immediately with new bands.
- If a discrepancy regarding the patient's identity is encountered by any member of the hospital staff prior to any procedure, the procedure shall be delayed until the issues are resolved. If the discrepancy cannot be resolved, it should be referred to

the appropriate Nurse Manager. All matters not resolved at this level will be referred to the Administrator on Duty.

For ambulatory clinic/procedure patient's identification will take place by comparing the addressographed progress or procedure note with the stated name and date of birth by the patient.

For newborn identification refer to Policy No: I-2A :Newborn Identification" in the Newborn/Maternal Child Policy and Procedure Manual.