



**COHESIVE HEALTHCARE MANAGEMENT & CONSULTING**

**Mangum Regional Medical Center**

TITLE		POLICY	
<b>Precautions</b>		<b>516</b>	
MANUAL	EFFECTIVE DATE	REVIEW DATE	
<b>Rehabilitation</b>			
DEPARTMENT	REFERENCE		
<b>Rehabilitation Services</b>			

**SCOPE:** All rehabilitation staff providing or assisting with patient care at Mangum Regional Medical Center.

**PURPOSE:** To provide for safe and effective patient care.

**POLICY:** Clinicians will implement care strategies related to “precautions” that will protect the patient, protect the staff, and optimize the rehabilitation outcome.

**PROCEDURE:**

1. As a part of the evaluation process clinicians will list precautions or risk factors, related to that discipline and care management, that have been identified in the patient medical record or as a part of the therapy evaluation.
2. Care strategies shall be followed related to the identified precautions. Examples:
  - a. Falls
    - 2.a.1 Therapists shall address the reason for the falls as a part of the evaluation process, if it is appropriate to that discipline.
    - 2.a.2 Therapists may be engaged in therapeutic activities to reduce the risk of falls.
    - 2.a.3 Safety devices identified in the care plan shall be in place when the therapist is not treating the patient.
    - 2.a.4 Gait belts shall be used when patient is identified as at risk for falls, unless contraindicated, when therapist is performing activities such as mobility training or ADL training that includes standing or moving from surface to surface.
  - b. Infections
    - 2.b.1 Therapists will follow Standard or Transmission Based Precautions.
    - 2.b.2 Therapists will follow any other special precautions, such as isolation techniques, as identified per the plan of care.
  - c. Use of oxygen
    - 2.c.1 Clinicians will be in-serviced by facility staff on the use of oxygen.

- 2.c.2 Clinicians will follow the process identified in the patient care plan for the use of oxygen
- 2.c.3 Clinicians will report to the charge nurse if there are any problems related to use of oxygen.
- 2.c.4 If doing O2 saturations are a part of the rehab plan of care, these shall be recorded in the medical record and the rehab program shall be modified to meet the patient needs.
- d. Swallow
  - 2.d.1 Rehab staff shall adhere to the identified swallow precaution, if any, except if evaluating or working on new strategies as a part of the skilled care program for that discipline.
  - 2.d.2 Therapist will be a part of the care team in identifying when modified barium swallows may be medically necessary.
- 3.0 Rehab staff shall report to nursing any new behaviors that create a risk situation to nursing and document this communication.

**REVISIONS/UPDATES**

Date	Brief Description of Revision/Change