

COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

Mangum Regional Medical Center

TITLE		Policy	
Change in Patient Medical Status			511
MANUAL	EFFECTIVE DATE	REVIEW DATE	
Rehabilitation			
DEPARTMENT	REFERENCE		
Rehabilitation Services			

- **SCOPE:** All professional rehabilitation staff members providing patient care at Mangum Regional Medical Center.
- **PURPOSE:** To ensure that rehabilitation service's personnel adhere to and implement certain actions with regard to a change in patient medical status during the course of the patient's treatment.
- **POLICY:** Basic patient safety considerations are implemented when a patient presents with one or more of the following signs or symptoms.
 - 1. Changes in vitals, i.e. blood pressure, pulse and/or respiration
 - 2. Illness apparent and specific complaints
 - 3. Shortness of breath
 - 4. Dizziness
 - 5. Specific complaints of pain
 - 6. Swallowing difficulty and/or discoloration
 - 7. Restlessness and/or decrease in physical endurance
 - 8. Other medical symptoms

PROCEDURE:

- 1. When patient presents with general signs or symptoms including, but not limited to:
 - a. Assesses blood pressure, pulse, and respirations:
 - b. Notify primary nurse and/or referring physician/provider of a change in condition, reporting vital signs, observable signs, and or patient complaints:
 - c. Follow instructions given by nurse of physician/provider:
 - d. Document what occurred and action taken:
 - e. Before continuing therapy, check with nursing and/or referring physician/provider to see if there was a medical status change that would impact the patient's ability to continue with therapy services.
- 2. Change in medical status
 - a. Therapy re-start orders are needed if there is a significant medical status change with the patient:

- b. Re-evaluate if there is a significant change, having checked the medical record and with nursing and/or referring physician to see if there was a medical status change:
- c. If episode does not result in medical or functional change, continue treatment plan:
- d. If change necessitates discharge from the facility, then a discharge is completed with new orders and evaluation upon return.

REVISIONS/UPDATES

Date	Brief Description of Revision/Change