

Administrative Policy
POLICY NO.: 200.02102A

POLICY TITLE: Patient Identifiers

Submitted by: Dr. Sergio Gonzalez- Arias, MD, PhD, FAANS, FACS
Title: Executive Associate Dean, Office of Clinical Affairs, Chair of QIPSC

Approved by: Quality Improvement Patient Safety Committee (QIPSC)

Committee Chair: Dr. Sergio Gonzalez- Arias, MD, PhD, FAANS, FACS
Title: Executive Associate Dean, Office of Clinical Affairs, Chair of QIPSC

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SUMMARY & PURPOSE: The use of *Patient Identifiers* by matching the patient’s identity with the correct treatment is a critical component to prevent instances of misidentification of patients, preventing harm and maintaining patient safety. The failure to correctly identify patients and their information for an intended clinical intervention can result in providing wrong patient information, wrong site procedures, medication and diagnostic testing errors. Herbert Wertheim College of Medicine (HWCOM) requires that **two Patient Identifiers**— (patient’s full name and date of birth) be utilized through every step of patient care from registration, care and treatment, diagnostic testing, medication management and discharge. The National Patient Safety Goals (NPSG) set forth yearly as an industry standard emphasizes the use of *Patient Identifiers* as National Patient Safety Goal #1 in promoting quality and patient safety in all levels of patient care.

SCOPE/APPLICABILITY: This policy applies to all the HWCOM Clinical Locations and, affiliated institutions where faculty, students and /or staff provide care to patients. The HWCOM clinical locations are: FIU Health Modesto Maidique, (“MMC”), FIU Health Broward, Green Family Foundation NeighborhoodHELP Mobile Health Centers and Household visits and the Linda Fenner 3D Mobile Mammography Center. For the faculty, students and staff that are providing patient care in the *affiliated* hospitals, outpatient and diagnostic centers the policies and procedures of those institutions will govern their reporting responsibilities.

POLICY: Herbert Wertheim College of Medicine utilizes two *Patient Identifiers*, (patient name and date of birth) at all times when providing care, treatment or services. If a third identifier is required, record identification number can be utilized. The two *Patient Identifiers* will be used when registering a patient, administering medications, collecting lab samples, other specimens, providing prescriptions and any treatments or procedures. An active communication process will occur when the patient identifiers are

being asked versus passive communication. In active communication, the patient is asked directly to provide name and date of birth versus passively providing them with name and date of birth and asking them to verify. The active communication ensures that patient is actively involved in the process of promoting patient safety and verifies correct identification.

DEFINITION:

Patient Identification: Correct patient identification is achieved when the healthcare worker is able to confirm the information given by the patient with the patient and the patient's record.

Patient Identifiers: For the purposes of this policy the *Patient Identifiers* for HWCOR are: (Full name and date of birth). Medical record identification number can be utilized as a third *Patient identifier if necessary*.

Misidentification: This can occur when a healthcare worker mistakes one patient for another by not following correct procedure utilizing the *Patient Identifiers*.

National Patient Goal (NPSG): An Industry standard and yearly goal developed to help prevent medical errors and maintain quality and patient safety and reduce harm. NPSG goal #1 is correct use of *Patient Identifiers*.

Active Communication of asking *Patient Identifiers*

Asking the patient to tell the healthcare worker their name and date of birth.

Passive Communication of asking *Patient Identifiers*

The healthcare worker *telling* the patient their name and date of birth.

PROCEDURE:

1. Process: Initial Identification - All patients are asked to provide their unique *Patient Identifiers* when receiving care in any of our HWCOR clinical settings.

The following are the approved *Patient Identifiers* for HWCOR to ask patients:

- Patient's Full Name
- Date of Birth

A third *Patient Identifier* can be utilized if there are two patients with the same name. In this case, the patient's Medical Record Identification number can be used. In the Centricity EMR, the Patient ID # serves this purpose. The third identifier is necessary in instances of a patient name alert because two (or more patients) have the same name, names close to being spelled the same and /or pronounced the same. This third identifier also serves to clarify when patient specimens are obtained so that the specimen is properly designated to the right patient.

The patient's room number or physical location is never utilized as a *Patient Identifier* for safety.

2. Identification Reconfirmation

- The unique *Patient Identifiers* will be used at HWCOR to reconfirm patient identification prior to every instance of administering medications, taking blood samples and other specimens, performing treatments, procedures, providing prescriptions and discharge instructions.

- Minimum the two *Patient Identifiers* the **Patient Name and Date of Birth**. (The patient’s full name and date of birth at will be asked from the patient and will be checked against the identifiers on the requisition, medication or specimen collection container label, or medical record to ensure proper identification).
 - All containers used for lab specimens are to be labeled *in the presence of the patient* with patient collaboration. Pre- labeling of specimens is discouraged to prevent labeling errors with wrong patient labels.
3. Two identifiers should be used **before** performing the following:
- Registration
 - Before patient care begins
 - Blood, urine or other specimens
 - Prescribing, dispensing or administering medication
 - Performing Tests (e.g. ECG or X-rays)
 - During surgery “Time-out” procedure prior to surgery
 - Any procedure (mammography, Intra-uterine device (IUD) insertion, small biopsy procedure) any other procedures as appropriate
4. Reduce harmful outcomes from avoidable patient identification errors: Do-the-2. Verify two patient identifiers—**every patient, every time**. Know that you have a primary responsibility to check the identity of patients and match the correct patients with the correct care (e.g., laboratory results, specimens, procedures) *before* that care is administered. **Every time**.
5. When asking patients their *Patient Identifiers* use active communication versus passive communication whenever possible. Ask the patient to state his or her full name and date of birth and wait until the patient actively tells you his full name and date of birth.
- Example:** Active Communication: “Can you tell me your name and date of birth?”
Example: Passive Communication: “Mr. Smith your date of birth is September 13, 1960.”
6. If a patient is a minor or an adult who is unable to provide name and date of birth on arrival, the responsible party shall be asked to provide this information. The responsible party may be a parent or a legal guardian.
7. Educate patients on the importance and the relevance of *Patient Identifiers* frequently and throughout their visit in a positive fashion and that asking this information frequently is done to maintain patient safety during their care.
8. Patient participation is crucial to ensure correct *Patient identifiers* are utilized in all stages of the patient care process.
9. If a patient injury occurs due to mis-identification occurs , mislabeling of specimens , wrong procedure , incorrect labs or discharge instructions please complete an incident report via clarity system link of desktop icon.
- [Link: https://events.healthcaresafetyzone.com/EventsModuleWeb/Default.aspx?cs=7eefdf11-4184-41f0-bd9b-9695c86716a0&groupaccessid=0d36cd8b-cdef-4401-9243-0ddd6ee4b311](https://events.healthcaresafetyzone.com/EventsModuleWeb/Default.aspx?cs=7eefdf11-4184-41f0-bd9b-9695c86716a0&groupaccessid=0d36cd8b-cdef-4401-9243-0ddd6ee4b311)

10. If a medical emergency occurs that requires transfer to higher level of care please refer to HWC
Administrative Policy: *Responding to a Medical Emergency* No.: **200.02.100A**

SUPPORTING/REFERENCE DOCUMENTATION:

- http://www.jointcommission.org/standards_information/npsgs.aspx.
2017 National Patient Safety Goals Patient Identifiers

RELATED POLICIES, PROCEDURES, AND ASSOCIATED FORMS:

- HWC Administrative Policy: *Incident Reporting* No.: **200.03.100A**
- HWC Administrative Policy: *Responding to a Medical Emergency* No.: **200.02.100A**