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, laboratory, and diagnostic 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, laboratory testing, medication management, referrals, pre-procedure preparations, procedural interventions, consent process, discharge, and release of medical records. The National Patient Safety Goals (NPSG) sets forth yearly as an industry standard the use of Patient Identifiers as National Patient Safety Goal #1 in promoting quality and patient safety at 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”), 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 and/or services. If a third identifier is required, the 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 their name and date of birth versus passively providing them with the name and date of birth and asking them to verify. The active communication ensures that the patient is actively involved in the process of promoting patient safety and verifies correct identification.

DEFINITIONS:

**Patient Identification:** Correct patient identification is achieved when the healthcare worker can confirm the information given by the patient with the patient through a process of active communication and the patient’s record.

**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.

**Patient Identifiers:** For the purposes of this policy the Patient Identifiers for HWCOM are: (Full name and date of birth). Medical record identification number can be utilized as a third Patient identifier if necessary for patients with same name or names that look alike or sound alike and have same birthdates.

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

**National Patient Goal (NPSG):** An Industry gold 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.

**Electronic Medical Record:** (EMR)

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

   The following are the approved Patient Identifiers for HWCOM to actively 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, or names that look alike or sound alike have same birthdate. In this case, the patient’s Medical Record Identification number can be used. In the 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 reasons.

2. Identification Re-confirmation
   - The unique Patient Identifiers will be used at HWCOM to reconfirm patient identification prior to every instance of administering medications, taking blood samples and other specimens, performing treatments, procedures, providing prescriptions, documenting, scanning, making changes to the medical record and discharge instructions.
   - Minimum of two Patient Identifiers: Patient Name and Date of Birth will be utilized. (The patient’s full name and date of birth 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 laboratory specimens are to be labeled in the presence of the patient after you have confirmed the patient identifiers. 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 medical or surgical, i.e. (mammography, Intra-uterine device (IUD) insertion, small biopsy procedure)
   - Documenting, scanning, or making changes to the EMR.
   - Releasing medical records

4. Avoid 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 their 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.”

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, spouse, adult caretaker assigned as a legal guardian.

Contact the Department of Compliance, Privacy Officer if you have any questions regarding patient capacity/ minors or any other questions regarding the informed consent process.

Compliance 305-348-0622 (Direct Line)
6. Educate patients on the importance and the relevance of asking *Patient Identifiers* frequently and throughout their visit in a positive fashion. Inform them that asking this information frequently is done to maintain patient safety throughout their care.

7. Patient participation is crucial to ensure correct *Patient identifiers* are utilized in all stages of the patient care process.

8. Please complete an incident report for incorrect use of patient identifiers: mis-identification, mislabeling of specimens, wrong procedure, incorrect labs or discharge instructions please complete an incident report via clarity system link located on your desktop. For additional details please refer to HWCOM Administrative Policy: *Incident Reporting No.: 200.03.100A*

   Clarity Icon

9. The online incident reporting system will be completed in the electronic system,

10. If a medical emergency occurs due to incorrect use of identifiers that requires transfer to higher level of care, please refer to HWCOM Administrative Policy: *Responding to a Medical Emergency No.: 200.02.100A*

**SUPPORTING/REFERENCE DOCUMENTATION:**


**RELATED POLICIES, PROCEDURES, AND ASSOCIATED FORMS:**

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