# **Purpose**

# To permit each clinical employee to act at his/her highest level of training and licensure in order to achieve the highest quality care and efficient patient flow in a team care environment.

To assure preventive and diagnostic services are provided in a timely manner to effectively identify and monitor medications use, disease states, and health maintenance efforts of the patient.

To facilitate the population management goals set forth by the Health Resources Services Administration.

# **Policy**

# Roane County Family Health Care (RCFHC) will permit appropriately skilled clinical staff to execute standing orders when the order addresses a specific patient-care activity that can be applied to any patient meeting criteria during a defined time period.

1. The standing order is documented in the medical record by the individual making the order, and the requisitions to laboratory, x-ray, or other providers are made under the name of the treating or primary clinician.
2. All staff will be oriented to the Standing Orders protocol prior to generating orders for the patients.

# RCFHC Quality Improvement Committee will monitor the Standing Order protocol to assess safety, cost, and quality measures. In addition, the QIC will revise the standing orders periodically to reflect best practices in care delivery.

**Definitions**

* **Licensure:** certain clinical staff members are licensed by the State of West Virginia or accredited by national organizations, to perform defined patient-care activities under direction of a Physician, Nurse Practitioner, or Physician Assistant.
* **Standing order:** An order for a specific patient-care activity that may be applied to any patient meeting criteria during a defined time period.

**Procedure**

1. The Medical Director, in conjunction with Providers of each module, will draft and recommend standing orders to the medical team through the Quality Improvement Committee. Standing orders will align with the Clinical Guidelines established by the Medical Director.
2. The RCFHC medical staff will authorize routine standing orders to enhance and streamline medical care.
3. Staff is prompted to use standing orders by referring to disease management templates in the EMR and will soon use the Health Maintenance reminder system to prompt orders.

**Approved Standing Orders**

**Nursing and Case/Care Management with Documented Competencies:**

1. Prompt the Provider to order certain laboratory tests as follows:
	1. Microalbumin and lipid panel for Diabetics if they have not been obtained in 1 year.
	2. INR for patients on chronic anticoagulation therapy with warfarin if not completed in last 2 months.
	3. Proceed with Emergency Contraception per protocol
	4. Urine culture for urine epithelial cell count < 5 or nitrate positive.
	5. Colorectal cancer screening for patients 50 years of age and older yearly.
2. Order certain radiology studies, as follows:
	1. PA Lateral Chest X-Ray for newly identified PPD positives.
	2. Mammography, per USPSTF recommendations.
	3. Spot Compression and/or ultrasound studies for abnormal mammograms, per recommendations of consulting radiologist.
3. Immunizations, per recommendations:
	1. Influenza Vaccine yearly
	2. Pneumococcal Vaccine for at risk patients and/or >= age 59
	3. Tdap booster every 10 years or Tdap if Td >5yrs
	4. Routine childhood immunizations per CDC guidelines
4. PPD testing and interpretation.
5. Refer:
	1. Dilated eye exam for diabetics yearly
	2. Diabetes education: individual or group
	3. Refer/report STD positive patients per DHHR policy. (attached)
	4. Refer HIV positive patients to Infectious Disease Specialty practice.
6. Perform in-office point of care testing as follows:
	1. HbA1c every six months
	2. Random fingerstick glucose for known or suspected diabetics
	3. Urinalysis for patients with dysuria
	4. Urine pregnancy testing on demand
	5. Fingerstick Hemoglobin during Health Maintenance Exams

**Policy Development and Monitoring:** Medical Director, Quality Improvement Committee

**Approval:** Executive Director, Roane County Family Health Care Board of Directors

**References:** Joint Commission on Accreditation of Healthcare Organizations (JCAHO);

Standards for Ambulatory Care (SAC); Primary Care Effectiveness Review (PCER) and Centers for Disease Control (CDC); U.S. Preventive Services Task Force (USPSTF)