



POLICY/PROCEDURE

CATEGORY: Risk Management	PAGE NUMBER: 1 of 4
SUBJECT: Identifiers/Patient Safety: Use of Two Patient Identifiers	DISTRIBUTION: Hospital Wide Manuals
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Stanton Territorial Health Authority (STHA) believes patient safety is about the management and reduction of risk to ensure that the care patients receive is as safe as possible. Communication is a vital part of patient safety. Accreditation Canada's standards include Required Organizational Practices (ROPs) that are specific to patient safety.

An Accreditation Canada ROP indicates the use of at least two patient identifiers before providing any service or procedure.

The purpose of using at least two identifiers is two-fold: first to reliably identify the individual as the person to whom the service or treatment is intended; second to match the service or treatment to that individual.

SPECIAL POINTS

The process of using two patient identifiers applies to all STHA inpatient and outpatient settings.

When two patients have the same or similar names and birth dates, an "alert" is placed in Medipatient and/or the chart indicating a need for a third identifier is required.

Unique Patient Identifiers Are:

- First and last name
- Date of birth (DOB)
- Healthcare number
- Patient armband (the armband must be attached to the patient at all times). Placing the armband on a bedside table or taping it to the bed or over the bed is not acceptable or reliable.
- A picture taken at the Hospital and kept on the patient medical record. The patient name and date of the picture must be printed on the back of the picture. NOTE: Patient or guardian consent is required to take patient pictures.

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Patient Identifiers

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PROCEDURES

Inpatient and Emergency Patients

Verification of patient information is completed at Registration using the patient's DOB and verifying their first and last name. The Emergency Contact Name and Next of Kin information is also confirmed and updated.

All inpatients, Medical Daycare, Surgical Daycare, the Northern Options for Women (NOW) and Emergency Department (ED) patients must have an armband applied upon registration. During regular working hours, the armband shall be placed on the patient's arm (unless the medical condition warrants otherwise) by the Registration staff. When Registration staff are not present, the verification process and application of the armband is the responsibility of the nursing staff.

If conscious, the patient shall be asked to state their name and hospital specific identifiers (e.g. birth date) and staff confirm the information provided matches that contained on the patient's armband, chart and any other documents accompanying the patient. When confirming patient identity, the staff must ask the patient to state their name and DOB rather than asking the patient to confirm the information.

Pediatric Patients

The parent/guardian shall be asked to state the child's name and hospital specific identifiers (e.g. birth date) and staff confirm the information provided matches that contained on the child's armband, chart and any other accompanying documents. If the parent/guardian is not available, two staff members shall confirm the two unique patient identifiers.

Unconscious/Confused or Incompetent Patients

Staff must confirm the patient's name and hospital specific identifiers (e.g. birth date) on their armband matches that contained on their chart and any other accompanying documents.

A caregiver or family member accompanying the patient should confirm identification prior to surgery or invasive procedures. If a caregiver or family member is not available, two staff members shall confirm the two unique patient identifiers and document the confirmation in the progress notes as follows:

Patient Identified by (staff name 1) and (staff name 2)

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Patients who arrive at the Hospital with Unknown Identity

A unique identifier shall be established through the Medipatient system (Medipatient Client ID Number) immediately and continue to be used until the patient is officially identified. This Medipatient Client ID Number will be used instead of Jane or John Doe or any of the other Medipatient Client IDs such as gender or DOB, until the real identity is established.

If all internal efforts to identify the patient fail, the RCMP should be contacted for assistance.

Diagnostic Imaging and Laboratory Patients

Specimen Collection and Diagnostic Imaging (Inpatient and Outpatient): the patient shall be asked to state their name and hospital specific identifiers (e.g. birth date) and staff confirm the information provided matches that contained on the patient's armband, requisition or any other documents accompanying the patient.

Two identifiers are required for any specimen. Specimens must be labeled immediately after collection to ensure the specimen is matched to the patient.

If an inpatient presents without an armband, the unit staff accompanying the patient is required to assist with identification.

Clinic/Extended Care/Alternative Level of Care/Long Term Psychiatric Patients or Rehabilitation

Clinics (Medical Clinic, Medical Centre, Eye Clinic): Two consistent unique patient identifiers shall be used prior to the provision of service or treatment.

Extended Care Patients, Alternate Level of Care Patients or Long Term Psychiatric Patients: When these patients are stable and well-known to the staff, visual recognition can be used as an identifier. When administering high risk interventions such as high-risk medications, staff shall ensure two identifiers are used as outlined above.

Rehabilitation Outpatient Areas: When these patients are stable and well-known to the staff, visual recognition can be used as an identifier.

