

**TITLE: PROCEDURAL CLASSIFICATION POLICY**

**MANUAL: MEDICAL STAFF**

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Effective Date: 3/22/2011

Approval : Anthony Kosinski, Medical Staff President

Reviewed/Revised: 01/14, 12/16

**PURPOSE\EXPECTED OUTCOME(S)**

Our values of excellence requires us to provide a safe environment of care. This policy was adopted in an effort to improve patient safety by clarifying certain requirements for performing procedures.

**POLICY**

The Medical Staff must review and define requirements for procedures. All healthcare workers involved in operative and other invasive procedures should understand and have access to the minimal requirements for performing procedures at Petaluma Valley Hospital. All procedures require a legitimate physician order.

This policy is not intended to apply to emergency medical conditions which require immediate intervention on the patient's behalf.

**DEFINITIONS**

Category 1: These are procedures that do not require specific informed consent<sup>1</sup> or the Universal Protocol<sup>2</sup>. A history and physical examination (H&P), an abbreviated H&P, or a pre-procedural assessment is not required.

Category 2: These are procedures that do not require specific informed consent<sup>1</sup>. The applicable components of the Universal Protocol are required. An H&P, an abbreviated H&P, or a pre-procedural assessment is not required.

Category 3: These are procedures that do require specific informed consent, as well as the applicable components of the Universal Protocol. An H&P, an abbreviated H&P, or a pre-procedural assessment is not required.

Category 4: These are procedures that require specific informed consent, as well as the applicable components of the Universal Protocol. A full H&P is not required, however, an abbreviated H&P or pre-procedural assessment is necessary.

Category 5: These are procedures requiring specific informed consent, the applicable components of the Universal Protocol and a full H&P. Any procedure that is not identified in Categories 1 through 4 must be considered a Category 5 procedure.

**SCOPE/RESPONSIBLE PERSONS**

Medical Staff Services will obtain input from the Department of Anesthesia and leaders of Medical Staff Departments whose membership includes physicians with privileges to perform invasive procedures.

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<sup>1</sup> In these instances, the patient's consent is general and is covered under the "Conditions of Admission Consent Form"

<sup>2</sup> Patient identity components of the Universal Protocol are required

**PROCEDURE**

The Executive Committee will be responsible for approval of and revisions to the procedural classification listings (**Exhibit A**).

**APPROVAL**

Medical Staff Executive Committee

Board of Trustees

<sup>1</sup> In these instances, the patient’s consent is general and is covered under the “Conditions of Admission Consent Form”

<sup>1</sup> Patient identity components of the Universal Protocol are required

Author/Department: Medical Staff Services (Source: Santa Rosa Memorial Hospital, Santa Rosa, CA)

Reviews/Approvals: Executive Committee: 3/15/11, 1/21/14, 12/20/16

Board of Trustees: 3/22/11, 1/28/14, 1/24/17