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**Section:** Process & System Management

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**Subject:** Patient Intake Protocol

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**I. Purpose:**

To delineate the procedural steps and the roles and functions of Urgent Care Center (UCC) personnel in the intake of patients who present for care in the Triage area.

**II. Level: Interdependent****III. Supportive Data:**

The Urgent Care Centers provide care and services to all individuals seeking care according to state and federal mandates, and actively seeks to comply with Emergency Medical Treatment and Active Labor Act (EMTALA) and Consolidated Omnibus Budget Act (COBRA) standards. The Emergency Services Division recognizes all patients' rights to medical care, and also the need to exercise clinical judgment standards in the triaging of patients. Therefore, individuals will be cared for on the basis of acuity and immediacy of need, and then according to time of arrival.

**IV. Procedure:**

All patients presenting to the registration desk will be asked for chief complaint on arrival. All patients will be Quick Registered in the Cerner System FirstNet Board utilizing appropriate FIN#. The Registered Nurse (RN) will prioritize patients with imminently life threatening conditions for immediate intervention. These patients will bypass registration. A white copy of the Triage Encounter Form will be delivered to registration for processing.

1. The Patient Financial Specialist (PFS) or other trained personnel, will stamp/write time of patient arrival and have patient/family complete the Encounter Form.
2. The PFS will ask the patient for one form of identification. (Picture identification is preferred) and obtain consent.
3. The information on the Encounter Form will be entered into the Cerner System FirstNet Board.
4. The clinical staff at triage will perform vital signs and document in the electronic medical record (EMR) and assist patient to chair, wheelchair or stretcher as indicated.
5. The RN will review the information obtained and perform a focused nursing assessment and assign an appropriate Emergency Severity Index (ESI) Level.
6. The clinical staff at triage will direct all patients to registration after the Medical Screening Examination (MSE).
7. Each area is responsible for facilitating registration paperwork for any patient who is brought "STAT" to the area from Triage.

**V. Complications / Interventions:**

Patient does not answer at Triage:




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- Call the patient at least three times at 15 minute intervals.
- Document, "No answer" and the times that the patient was called in the event section of the Electronic Medical Record (EMR)
- At the end of the third call, patient is discharged from the system and the Encounter Form is filed in the hybrid medical record

Patient's Condition Deteriorates:

- Re-assess the patient as indicated.
- Transfer patient to the appropriate treatment area by stretcher or wheelchair
- Inform registration of patient's location

**VI. References:**

Consolidated Omnibus Budget Act of 1985 (COBRA): Section 9121.  
 COBRA Statute: 42 USC 1395 dd: Emergency Medical Treatment and Active Labor Act (EMTALA).  
 Social Security Act: Section 1867

**Responsible Party:** Director of Patient Care Services UCC

**Reviewing Committee(s):** Not Applicable

**Authorization:** Associate Vice President  
 Urgent Care Center Development Operations