

**ANNA JAKUES HOSPITAL
ADMINISTRATIVE POLICY AND PROCEDURE MANUAL**

Subject: Documentation Requirements for the Physician History & Physical	Policy Number: M-20.9
Category: Medical Staff	Effective Date: June 2008
Page 1 of 2	Revised Dates:
Attachments: Available on AnnaOnLine Forms/Clinical Forms/MD Order Forms/History & Physical Urgent	Review Dates: 1/11
References: Medical Staff Bylaws 16.02.1.4.1-16.02.1.4.3	

POLICY

STATEMENT: A History and Physical document, reflecting an assessment performed by the physician must be contained within the patient medical records and be dated, timed and authenticated by the Attending Physician or authorized member of the Medical Staff examining the patient. The History and Physical needs to be complete, legible or typed, pertinent and relevant, and contain sufficient information necessary to provide the care and services required to address the patient's condition and needs.

RESPONSIBILITY: All members of the Hospital Medical Staff

PROCESS:

1. The Physician medical History and Physical assessment and documentation needs to be completed within the first twenty-four (24) hours of admission to the Hospital, including observation patients, or outpatient procedure.
2. The Attending Physician is responsible for the preparation and completeness of the History and Physical for each patient and needs to include: patient identification data, reason for admission (if admitted), assessment, medical history including the chief complaint, details of the present illness, past history, social history and family histories, medications, review of systems, allergies, physical examination, impressions drawn from the physical examination, laboratory data, diagnosis, and treatment plan for the patient.
3. A complete History and Physical examination needs to be performed by the Attending Physician or designee and be present on the patient medical record prior to performing any operative or diagnostic procedure on the patient.

Urgent/Emergency Procedures:

In the case of an urgent or emergency procedure, only, the History and Physical may be handwritten on the Short Stay history and Physical Form, providing that the information is **legible and complete** and the stay is less than forty-eight (48) hours. Patient stays over forty-eight (48) hours need a **complete and typed** History and Physical.

If the Pre-Operative History and Physical is completed for emergency surgery when transcription service is not available, which necessitates handwriting the History and Physical in order to provide documentation prior to the surgery, the History and Physical will be transcribed from the written note for further review, modification and signature by the Physician.

Elective Procedures:

In the case of elective procedures, the History and Physical needs to be **complete and dictated or typed**. For elective procedures there can be no handwritten History and Physical and the Short Stay History and Physical Form cannot be used.

Ambulatory Procedure Room (APR) Cases:

In the case of APR procedures, the History and Physical may be handwritten, providing that the information is **legible and complete** and the form is dated, timed and authenticated by the Attending Physician/Primary Surgeon.

4. When a patient is readmitted within seven (7) days for the same or a related problem, an interval history and Physical reflecting any subsequent changes may be used in the medical record provided the original information is available and complete.
5. If a Pre-Operative History and Physical is completed thirty (30) days prior to the scheduled surgery, it must be re-reviewed and the transcribed or stamped addendum statement needs to be dated, timed and initialed with any pertinent changes noted.

Addendum: All History and Physical exams must be performed and documented within 24 hours of admission or outpatient procedure. ___By checking here I confirm there are no changes in the history and physical status of this patient since the date of dictation.

Authorizing Signatures	Name / Title	Date
Administration:	Delia O'Connor, Pres. & CEO	
Medical Staff Exec:	Joe Hull, MD, Pres. Medical Staff	