


<b>Name of Policy:</b>	<u>Manual Back Up for Computer</u>	 <p><b>Effective Date:</b> November 20, 2009 Initial Effective Date: 9/1979</p>
<b>Policy Number:</b>	3364-101-02-10	
<b>Department:</b>	Ambulatory Services	
<b>Approving Officer:</b>	Associate Vice President Associate Executive Director	
<b>Responsible Agent:</b>	Administrator, Ambulatory Services & Behavioral Health	
<b>Scope:</b>	Ambulatory Services	
<input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Minor/technical revision of existing policy		
<input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy		

**(A) Policy Statement**



A back up system will be available when the computer system is not operating.

**(B) Purpose of Policy**

To insure a continuous flow of information in processing patient appointments in the Clinic.

**(C) Procedure**

1. Short Term Computer Downtime - Less than two (2) days:
  - a. To obtain a Medical Record number if only STAR is down, check MYSIS. When MYSIS is not available in your clinical area call Pre-Registration, Ext. 6272 for a MYSIS search.
  - b. If both computer systems are down, contact Health Information Management for a number, giving patient's name, birth date and social security number.
  - c. If Health Information Management issues a new number, Health Information Management shall enter the number into the computer when it is back on-line.
  - d. Clinic shall enter demographic and insurance information into the computer from the Patient Registration Form.
  
2. Long Term Computer Down Time - More than two (2) days. In addition to the above procedures:
  - a. All papers shall be sorted by:
    - 1) Day
    - 2) Patient Registration forms
    - 3) Hospital charges
  
  - b. When the computer is back on-line, the oldest dated information shall be entered first.

<b>Approved by:</b>  _____ Vickie Geha Administrator, Ambulatory Services & Behavioral Health	<i>12/3/09</i> _____ Date	<b>Review/Revision Date:</b> 11/1981    3/1997 8/1984    1/1999 9/1987    1/2001 3/1990    12/2004 5/1991    9/2006 4/1992    11/20/2009 10/1993 3/1996
 _____ Norma Tomlinson, RN, MSN, NE-BC Associate Vice President Associate Executive Director	<i>12/21/09</i> _____	
<i>Review/Revision Completed By:</i> <i>Ambulatory Services</i>		<b>Next Review Date:</b> 11/1/2012
<b>Policies Superseded by This Policy:</b> 2-10		

*It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.*