


Name of Policy: Elopement Precautions and Processes			
Policy Number: 3364-122-13			
Approving Officer: Chief Executive Officer Chief Nursing Officer Medical Director		Effective date: 4/2026	
Responsible Agent: Nursing Director Inpatient Psychiatry		Original effective date: August 1983	
Scope: The University of Toledo Medical Center			
Key words: Kobacker, safety, elopement, precautions, restrictions			
	New policy proposal		Minor/technical revision of existing policy
X	Major revision of existing policy		Reaffirmation of existing policy

(A) Policy statement

To provide safety for the patient and others in the environment and prevent elopement from the inpatient unit. Appropriate procedure will be followed in the event of an elopement.

(B) Purpose of policy

For the protection and safety of patients.

(C) Procedure

- (1) Patients may be placed on elopement precautions by a physician’s written or verbal order.
- (2) As a result of his/her clinical assessment, designated RN may place a patient on elopement precautions, and request that the physician sign this order during his/her next unit visit.
- (3) All elopement precaution orders will be written for a specific length of time and reviewed at the end of that time.

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- (4) Documentation of patient behavior will be made in the electronic medical record every shift, day, and night.
- (5) Patients on elopement precautions will be restricted to activities within the building and will be observed closely when near exits or when being transported off the unit.
- (6) All staff need to be aware of the potential for elopement. The medical record will be flagged, indicating the patient is on elopement precautions.
- (7) The patient's team members will be notified of any patient that is on elopement precautions by the nurse each morning.
- (8) If an elopement occurs:
 - (a) Check the entire unit, including the patient's room.
 - (b) The following persons will be notified in the following order.
 - (i) Campus police/campus security. Give picture and description of patient, clothing, and circumstances.
 - (ii) Toledo Police Department, if necessary.
 - (iii) Nursing director or administrative director.
 - (iv) Unit medical director and/or attending physician.
 - (v) Parent/guardian.
 - (vi) Hospital administration, if available.
 - (vii) Other necessary team members - i.e., therapist, school.
- (9) Document in medical record of all notifications or attempts to notify, as well as all interventions made and any relevant clinical observations related to patient's behavior and mental state.

Elopement Precautions and Processes

Approved by:

/s/

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4/6/2026

Date

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Date

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Date

*Review/Revision Completed by:
Psychiatry – Inpatient Administration*

Policies Superseded by this Policy:

- 3364-120-74 Absent Without Leave
- Guideline: Runaway precautions

Initial effective date: August 1983

Review/Revision Date:

April 1994	April 8, 2014
May 1995	May 26, 2016
April 1996	July 12, 2019
May 1997	June 1, 2022
May 1998	April 2025
April 1999	April 2026
August 2001	
January 2002	
April 2004	
March 2007	
May 17, 2010	

Next review date: 4/2029