

Name of Policy: <u>Accurate Documentation</u> Policy Number: 3364-135-155 Department: Radiology Approving Officer: Chief Operating Officer - UTMC Responsible Agent: Chairman & Professor, Radiology Scope: Radiology	 Effective Date: 1/1/2023 Initial Effective Date: 1/1/2020
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	
<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

It is the policy of the Radiology Department of the UTMC to ensure that all patients are properly identified with accurate patient information prior to and after any care, treatment or services that are provided.

(B) Purpose of Policy

To ensure appropriate and accurate information related to patient procedures is processed.

(C) Procedure

It is imperative all information related to patient procedures is accurate. It is the responsibility of the individual performing the procedure and all related duties to assure the accuracy of information. This information includes, but is not limited to:

- Receiving order from license practice providers (policy 3364-87-42)
- Correct name
- Medical Records Number and or date of birth as appropriate
- Left and right markers/Image descriptors
- Actual procedure must correlate with RIS descriptor
- Patient symptoms/reason for the exam
- Time out, when required
- Tech initials

Approved by: <u>/s/</u> _____ <u>01/04/2023</u> Haitham Elsamaloty, MD Chairman & Professor, Radiology Date <u>/s/</u> _____ <u>01/10/2023</u> Christine Stesney-Ridenour, FACHE Chief Operating Officer - UTMC Date Review/Revision Completed By: Haitham Elsamaloty, MD	Review/Revision Date: 1/1/2020 1/1/2023 Next Review Date: 1/1/2026
Policies Superseded by This Policy: F-001	