POLICY

High Peaks Hospice (HPH) patients who have symptoms of their illness that cannot be managed at home, or who have a non-hospice emergency, may be brought to the Emergency Room (ER). Once in the ER, the patient is under the care of the ER staff. HPH staff should be consulted regarding the current plan of care and proposed treatment of the patient if the patient is admitted related to their hospice diagnosis. In all cases, the patient’s attending physician or his designee should be consulted.

PROCEDURE

1. If a patient on HPH services is taken to an Emergency Room (ER) without the prior knowledge of HPH, HPH staff will contact the ER as soon as possible. The ER staff may not be aware the patient is a HPH patient.

2. Patients in the ER for non-hospice diagnosis are under the care of the ER staff and the patient and the family should make treatment decisions. HPH staff will be available to facilitate this process if requested.

3. In cases where HPH is sending a patient to the ER, HPH staff will notify the ER – wherever possible, prior to arrival – regarding the reason for coming to the ER and the patient’s hospice diagnosis.

4. In cases where the patient is in the ER for symptoms related to their hospice diagnosis, HPH will be consulted along with the attending physician regarding treatment.

5. If disagreements arise between HPH staff and the ER staff, related to treatment, the ER physician in consultation with the attending physician or his designee with the consent from the patient and/or family shall make the final treatment decisions. Staff involved should try to bring disputes between HPH and the ER to the attention of the Patient Care Coordinator (PCC) and/or Medical Director of HPH.

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