

ACUTE CARE HOSPITAL POLICY REVIEW FORM 1

DATA TAG	REQUIREMENT	COMMENTS
A0000	INITIAL COMMENTS	
A0001	CONDITION OF PARTICIPATION Non-participating Hospitals, Emergencies	
A0020	CONDITION OF PARTICIPATION Compliance with Federal Laws	
A0021	STANDARD: Compliance with Federal Laws	
A0022	STANDARD: Licensure of Hospital	
A0023	STANDARD: Licensure of Personnel	
A0043	CONDITION OF PARTICIPATION Governing Body – The facility must have an effective governing body legally responsible for	
A0044	STANDARD: MEDICAL STAFF The governing body must ensure that specific medical staff requirements are met.	
A0045	STANDARD: Medical Staff – Appointments The governing body must determine according to state law,	
A0046	STANDARD: Medical Staff – Appointments The governing body must appoint members of the medical staff after ...	
A0047	STANDARD: Medical staff – Bylaws The governing body must ensure the medical staff has bylaws.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 2

DATA TAG	REQUIREMENT	COMMENTS
A0048	STANDARD: Medical Staff Bylaws and Rules; The governing body must approve med. staff bylaws and other med staff.	
A0049	STANDARD: Medical Staff – Accountability; The governing body must ensure that the med staff is accountable to the	
A0050	STANDARD: Medical Staff – Selection Criteria; The governing body must ensure that the criteria for selection are individual	
A0051	STANDARD: Medical Staff – Privileges of Staff; The governing body must ensure that the hospitals rules and criteria for med	
A0057	STANDARD: CEO The governing body must appoint a CEO who is responsible for managing the hospital.	
A0063	STANDARD: CARE OF PATIENT In accordance with hospital policy, the governing body must ensure that specific patient care requirements are..	
A0064	STANDARD: Care of Patient: Practitioners Every Medicare patient is under the care of an MD, DO, DDS, DDM,....	
A0065	STANDARD: Care of Patient: Admission Patients are admitted to the hospital only on recommendation of a licensed	
A0066	STANDARD: Care of Patient: Practitioners If a Medicare patient is admitted by a practitioner not specified above, the	
A0067	STANDARD: Care of Patient: MD/DO On Call An MD or DO is on duty or on-call at all times.	
A0068	STANDARD: Care of Patient: Responsibility for Care: An MD or DO is responsible for the care of every Medicare patient	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 3

DATA TAG	REQUIREMENT	COMMENTS
A0073	STANDARD: Institutional Plan and Budget.	
A0074	STANDARD: Institutional Plan and Budget. The plan must be submitted for review to the planning agency designated...	
A0075	STANDARD: Institutional Plan and Budget. A capital expenditure is not subject to....	
A0076	STANDARD: Institutional Plan and Budget. The plan and budget must be reviewed and updated annually.	
A0077	STANDARD: Institutional Plan and Budget. The plan must be prepared under the direction of the governing body and	
A0083	STANDARD: CONTRACTED SERVICES The governing body must be responsible for services furnished...	
A0084	STANDARD: Contracted Services. The governing body must ensure that the services provided under contract are provided in a safe and effective...	
A0085	STANDARD: Contracted Services. The hospital must maintain a list of all contracted services including scope and nature of services provided.	
A0091	STANDARD: EMERGENCY SVCS. The hospital; must ensure that specific emergency service requirements are met.	
A0092	STANDARD: Emergency Services. If emergency services are provided at the hospital, the hospital must comply with requirements of 482.55	
A0093	STANDARD: Emergency Services. If emergency services are not provided at the hospital, governing body must assure med staff has written P&P for	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 4

DATA TAG	REQUIREMENT	COMMENTS
A0094	OFF CAMPUS EMERGENCY P&P. If emergency services provided at hospital but not at off campus departments, governing body must...	
A0115	CONDITION OF PARTICIPATION: PATIENT RIGHTS; The hospital must protect and promote the rights of each patient.	
A0116	STANDARD: Patient Rights – Notice of Rights. the hospital must ensure that specific notice of rights requirements are met.	
A0117	Patient Rights – Notice of Rights. The hospital must inform each patient or representative of the patients rights in advance of furnishing or.....	
A0118	Patient Rights – Grievances. The hospital must establish a process for prompt resolution of patient grievances and must inform each pt...	
A0119	Patient Rights – Review of Grievances The governing body must approve and be responsible for the effective operation of the grievance process...	
A0120	Patient Rights – Timely Referral of Grievances. The grievance process must include a mechanism for timely referral of...	
A0121	Patient Rights – Grievance Procedures The hospital must establish a clearly explained procedure for the submission of a written or verbal...	
A0122	Grievance Review Time Frames. The grievance process must specify time frames for review of the grievance and the response.	
A0123	Patient Rights – Notice of Grievance Decision: In the resolution of the grievance, the hospital must provide the pt. with written notice of.....	
A0129	STANDARD: Patient Rights – Exercise of Rights. The hospital must ensure that specific exercise of rights requirements are met	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 5

DATA TAG	REQUIREMENT	COMMENTS
A0130	STANDARD: Patient Rights – Participation in Care Planning. The patient has the right to participate in development and implementation..	
A0131	STANDARD: Patient Rights – Informed Consent The patient or his/her representative has the right to make informed	
A0132	STANDARD: Patient Rights – Advanced Directives The patient has the right to formulate advanced directives and have hospital	
A0133	STANDARD: Patient Rights – Admission Status Notification. The patient has the right for family and personal MD to be notified of...	
A0142	STANDARD: PATIENT RIGHTS- PRIVACY AND SAFETY. The hospital must ensure that privacy and safety requirements are met.	
A0143	STANDARD: Patient Rights – Personal Privacy. The patient has the right to personal privacy.	
A0144	STANDARD: Patient Rights – Care in a Safe Setting The patient has the right to receive care in a safe setting.	
A0145	STANDARD: Patient Rights – Free from Abuse/Harrassment. The patient has the right to be free from all forms of abuse or harrassment	
A0146	STANDARD: PATIENT RIGHTS- Confidentiality of Records. The hospital must ensure that specific confidentiality of pt. records req....	
A0147	STANDARD: Patient Rights – Confidentiality of Records. The patient has the right to the confidentiality of their records.	
A0148	STANDARD: Patient Rights – Access to Medical Records. The patient has the right to access information contained in the clinical..	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 6

DATA TAG	REQUIREMENT	COMMENTS
A0154	<p>STANDARD: RESTRAINTS FOR ACUTE MED/SURG NEEDS. The hospital must ensure the specific pt. rights for restraints are met.</p>	
A0155		
A0156		
A0157		
A0158		
A0159	<p>STANDARD: Patient Rights – Restraint or Seclusion A restraint is any manual method, phys. or mech. device, material or</p>	
A0160	<p>STANDARD: Patient Rights – Restraint or Seclusion A restraint is a drug or medication when it is used to restriction to</p>	
A0161	<p>STANDARD: Patient Rights – Restraint or Seclusion Restraints do NOT include devices such as ortho braces, surg. dressings,</p>	
A0162	<p>STANDARD: Patient Rights – Restraint or Seclusion Seclusion is the involuntary confinement of a pt. alone in a room &</p>	
A0163		
A0164	<p>STANDARD: Patient Rights – Restraint or Seclusion Restraint or seclusion may only be used when other less restrictive</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 7

DATA TAG	REQUIREMENT	COMMENTS
A0165	STANDARD: Patient Rights: Restraint or Seclusion The type or technique of restraint or seclusion must be least restrictive	
A0166	STANDARD: Patient Rights: Restraint or Seclusion The use of restraints or seclusion must be in accordance with written	
A0167	STANDARD: Patient Rights: Restraint or Seclusion The use of restraints or seclusion must be implemented in accordance with	
A0168	STANDARD: Patient Rights: Restraint or Seclusion The use of restraints or seclusion must be in accordance with orders of a r	
A0169	STANDARD: Patient Rights: Restraint or Seclusion Orders for restraints/seclusion must never be written as standing orders or	
A0170	STANDARD: Patient Rights: Restraint or Seclusion The attending MD must be consulted ASAP if not the ordering MD.	
A0171	STANDARD: Patient Rights: Restraint or Seclusion Unless superseded by state law, each order for management of violent/self-..	
A0172	STANDARD: Patient Rights: Restraint or Seclusion Unless superseded by state law, after 24 hrs. before writing new order, pt	
A0173	STANDARD: Patient Rights: Restraint or Seclusion Unless superseded by state law, each order for restraint for physical safety	
A0174	STANDARD: Patient Rights: Restraint or Seclusion Restraint or seclusion must be discontinued at the earliest possible	
A0175	STANDARD: Patient Rights: Restraint or Seclusion The condition of the patient in restraints or seclusion must be ...	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 8

DATA TAG	REQUIREMENT	COMMENTS
A0176	STANDARD: Patient Rights: Restraint or Seclusion Physician or LIP training requirements must be specified in hospital policy.	
A0177		
A0178	STANDARD: Patient Rights: Restraint or Seclusion When used for management of violent or self-destructive behavior, pt. must	
A0179	STANDARD: Patient Rights: Restraint or Seclusion When used for management of violent or self-destructive behavior, pt. must	
A0180	STANDARD: Patient Rights: Restraint or Seclusion States are free to have requirements by statute or regulation that are more	
A0181		
A0182	STANDARD: Patient Rights: Restraint or Seclusion If the face to face eval specified is conducted by a trained RN or PA, the	
A0183	STANDARD: Patient Rights: Restraint or Seclusion All requirements specified are applicable to the simultaneous use of	
A0184	STANDARD: Patient Rights: Restraint or Seclusion When restraint or seclusion is used, there must be documentation in the	
A0185	STANDARD: Patient Rights: Restraint or Seclusion When restraint or seclusion is used, there must be documentation of.	
A0186	STANDARD: Patient Rights: Restraint or Seclusion When restraint or seclusion is used, there must be documentation of	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 9

DATA TAG	REQUIREMENT	COMMENTS
A0187	STANDARD: Patient Rights: Restraint or Seclusion When restraint or seclusion is used, there must be documentation of	
A0188	STANDARD: Patient Rights: Restraint or Seclusion When restraint or seclusion is used, there must be documentation of	
A0189		
A0190		
A0191		
A0192		
A0193		
A0194	STANDARD: Patient Rights: Restraints or Seclusion The patient has the right to safe implementation of rest/secl.	
A0195		
A0196	STANDARD: Patient Rights: Restraints or Seclusion; Staff must be trained and able to demonstrate competency in	
A0197		

ACUTE CARE HOSPITAL POLICY REVIEW FORM 10

DATA TAG	REQUIREMENT	COMMENTS
A0198		
A0199	STANDARD: Patient Rights: Restraint or Seclusion The hosp. must require staff to have education, training, and demonstrated	
A0200	STANDARD: Patient Rights: Restraint or Seclusion The hosp. must require staff ed. training in use nonphysical	
A0201	STANDARD: Patient Rights: Restraint or Seclusion The hosp. must require staff ed. training in choosing least restrictive	
A0202	STANDARD: Patient Rights: Restraint or Seclusion The hosp. must require staff ed. training in safe application of all .	
A0203		
A0204	STANDARD: Patient Rights: Restraint or Seclusion The hosp. must require training in specific behavioral changes indicating	
A0205	STANDARD: Patient Rights: Restraint or Seclusion Staff must be trained and able to demonstrate competency in	
A0206	STANDARD: Patient Rights: Restraint or Seclusion The hosp. must require staff ed. training in use of first aid techniques	
A0207	STANDARD: Patient Rights: Restraint or Seclusion Individuals providing staff training must be qualified thru education,	
A0208	STANDARD: Patient Rights: Restraint or Seclusion The hospital must document in staff personnel records, training and.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 11

DATA TAG	REQUIREMENT	COMMENTS
A0209		
A0210		
A0211		
A0212		
A0213		
A0214	STANDARD: Patient Rights: Restraint Death Hospitals must report deaths associated with use of restraints to CMS.	
A0215		
A0216		
A0217		
A0221	STANDARD: Patient Rights: Seclusion Death Reporting. Hospitals must report deaths assoc. w seclusion in 24hrs.	
A0222		

ACUTE CARE HOSPITAL POLICY REVIEW FORM 12

DATA TAG	REQUIREMENT	COMMENTS
A0263	<p>CONDITION OF PARTICIPATION: QAPI. The hosp. must develop, implement, & maintain an effective, on-going QAPI program</p>	
A0264	<p>STANDARD: QAPI Program scope. The hospital must ensure that specific program requirements are met.</p>	
A0265	<p>STANDARD: QAPI: Health Outcomes. The program must include an ongoing program that shows measurable</p>	
A0266	<p>STANDARD: QAPI: Medical Errors The program must include an ongoing program that shows measurable</p>	
A0267	<p>STANDARD: QAPI: Quality Indicators The program must include an ongoing program that shows measurable</p>	
A0273	<p>STANDARD: QAPI Program Data The hospital must ensure that specific program data requirements are met.</p>	
A0274	<p>STANDARD: QAPI: Program Data The program must incorporate quality indicator data including pt. care data</p>	
A0275	<p>STANDARD: QAPI: Quality of Care The hosp. must use data collected to monitor effectiveness & safety of care</p>	
A0276	<p>STANDARD: QAPI: Identify Improvement The hosp. must use data collected to identify opportunities for.</p>	
A0277	<p>STANDARD: QAPI: Program Data Frequency. The frequency and detail of data collection must be specified by</p>	
A0283	<p>STANDARD: QAPI PROGRAM ACTIVITIES. The hosp. must ensure specific prog. activities requirements are met.</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 13

DATA TAG	REQUIREMENT	COMMENTS
A0285	STANDARD: QAPI: Patient Safety The hospital must set priorities for it's performance improvement activities that focus on high risk,.....	
A0286	STANDARD: QAPI: Tracking. Performance improvement activities must track medical errors and adverse pt. events.	
A0287	STANDARD: QAPI: Improvement Activities. Performance improvement activities must track med errors and adverse pt.	
A0288	STANDARD: QAPI: Feedback & Learning. P.I. activities must track....., & implement preventative measures incl.	
A0289	STANDARD: QAPI IMPROVEMENT ACTIONS. The hosp. must take actions aimed at performance improvement.	
A0290	STANDARD: QAPI: Improvement Measures. The hosp. must ,ensure it's success after implementing actions aimed at	
A0291	STANDARD: QAPI: Sustained Improvement. The hosp. must track performance to ensure improvements are maintained.	
A0297	STANDARD: QAPI: Performance Imp. Projects. As part of QA&PI program, the hosp. must perform PI projects.	
A0298	STANDARD: QAPI: Performance Imp. Projects The number and scope of distinct imp. projects conducted annually must be	
A0299	STANDARD: QAPI: Perf. Imp. Projects in I.T. A hosp. may develop and implement an I.T. system explicitly designed to	
A0300	STANDARD: QAPI: Project Documentation. The hosp. must document what QAPI projects are being conducted	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 14

DATA TAG	REQUIREMENT	COMMENTS
A0301	STANDARD: QAPI: Project Documentation. The hosp. must document the reason for the QAPI projects being performed	
A0302	STANDARD: QAPI: Project Documentation. The hosp. must document measurable progress achieved on PI projects.	
A0303	STANDARD: QAPI: Performance Imp. Projects A hosp. is not required to participate in QIO cooperative projects, but own	
A0309	STANDARD: EXECUTIVE RESPONSIBILITIES. The hosp. Gov. body, med staff, & admin are responsible & accountable..	
A0310	STANDARD: Executive Responsibilities. The hosp. Gov. body, med staff, & admin are responsible & accountable.	
A0311	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable..	
A0312	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable.	
A0313	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable...	
A0314	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable.	
A0315	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable.	
A0316	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 15

DATA TAG	REQUIREMENT	COMMENTS
A0317	STANDARD: Executive Responsibilities The hosp. Gov. body, med staff, & admin are responsible & accountable.	
A0338	CONDITION OF PARTICIPATION MEDICAL STAFF. The hosp. must have organized med staff operates under bylaws...	
A0339	STANDARD: Composition of Medical Staff. Med staff must be composed of MD, DO, and according to state law other..	
A0340	STANDARD: Med. Staff Periodic Appraisals. The medical staff must conduct periodical appraisals of it's members.	
A0341	STANDARD: Med. Staff Credentialing. The med staff must examine the credentials of candidates for med staff	
A0347	STANDARD: Med Staff Org and Accountability. Med staff must be well organized and accountable to governing body.	
A0353	STANDARD: Med Staff Bylaws. The med staff must adopt and enforce bylaws to carry out it's responsibilities.	
A0354	STANDARD: Approval of Med Staff Bylaws The bylaws must be approved by the governing body.	
A0355	STANDARD: Med Staff Privileging The bylaws must include a statement of duties and privileges of each category of the med staff.	
A0356	STANDARD: ORGANIZATION OF MEDICAL STAFF. The bylaws must describe the organization of the medical staff.	
A0357	STANDARD: Medical Staff Qualifications. The bylaws must describe the qualifications to be met by the	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 16

DATA TAG	REQUIREMENT	COMMENTS
A0358	STANDARD: Medical Staff Responsibilities. The bylaws must describe the qualifications to be met by candidate	
A0359	STANDARD: Medical Staff responsibilities; The Bylaws must include a requirement for updated exam	
A0363	STANDARD: Criteria for Med Staff Privileging. the bylaws must include criteria for determining privileges to be granted to	
A0364	STANDARD: AUTOPSIES. The med staff should attempt to secure autopsies in all cases of unusual deaths and of medico-legal interest...	
A0385	CONDITION OF PARTICIPATION: NURSING SERVICES. The hosp. must have an organized nursing service providing 24hr svc...	
A0392	STANDARD: STAFFING AND DELIVERY OF CARE. Nursing service must have adequate #'s of lic, nurses & personnel.....	
A0393	STANDARD: RN/LPN Staffing. Nursing service must have adequate #'s of RN's, LPN's, and other	
A0394	STANDARD: Licensure of Nursing Staff. Nursing Service must have a procedure in place to ensure personnel	
A0395	STANDARD: RN Supervision of Nursing Care. A registered nurse must supervise and evaluate care of each patient.	
A0396	STANDARD: Nursing Care Plan. Hosp. must ensure that nursing staff develops and keeps current a nursing care plan for each patient.	
A0397	STANDARD: Patient Care Assignments. An RN must assign nursing care of each pt. to other nursing personnel in	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 17

DATA TAG	REQUIREMENT	COMMENTS
A0398	STANDARD: Supervision of Contract Staff. Non-employee lic. nursing staff working in hosp. must adhere to P&P	
A0404	STANDARD: ADMINISTRATION OF DRUGS. Drugs & biolog. must be prepared & admin according to Fed & state Law	
A0405	STANDARD: Administration of Drugs. All drugs & biolog. must be administered by, or under supervision	
A0406	STANDARD: Written Medical Orders for Drugs. Except Flu & Pneu vaccines, orders for drugs & biolog. must be	
A0407	STANDARD: Use of Verbal Orders. If verbal orders are used, they are to be used infrequently.	
A0408	STANDARD: Verbal Orders. When verbal orders used, must only be accepted by authorized personnel consistent with state & fed law.	
A0409	STANDARD: Blood Transfusions & IV Meds. Blood and IV meds must be administered per fed & state law &	
A0410	STANDARD: Hospital Procedures. There must be a hosp. procedure for reporting transfusion reactions, ADR's	
A0431	CONDITION OF PARTICIPATION: MED REC. SERVICES. Hosp. must have Med. Rec. Svc, that has admin responsibility for records	
A0432	STANDARD: ORGANIZATION AND STAFFING. The organization of Med. Rec. Svc must be appropriate to scope of svc.	
A0438	STANDARD: FORM & RETENTION OF RECORDS. The hosp. must maintain a record for each inpatient and outpatient.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 18

DATA TAG	REQUIREMENT	COMMENTS
A0439	STANDARD: 5 Year Retention of Record. Med records must be maintained in original & reproducible form for at	
A0440	STANDARD: Coding & Indexing of Records. Hosp. must have a system for coding and indexing records allowing for	
A0441	STANDARD: Confidentiality of Medical record. Hosp. must have procedure for ensuring confidentiality of patient	
A0442	STANDARD: Security of Medical Record. Hosp. must ensure that unauthorized individuals cannot gain access to or	
A0443	STANDARD: Release of Medical Record. Original medical records must be released only in accordance with Fed	
A0449	STANDARD: CONTENT OF RECORD. The med record must contain info to	
A0450	STANDARD: Medical Record Services. All patient medical record entries must be legible.	
A0454	STANDARD: Orders Dated and Signed. All orders must be dated and timed by the ordering practitioner.	
A0457	STANDARD: Verbal Orders Authenticated Based on Law. All verbal orders must be authenticated based on Fed & state law	
A0458	STANDARD: Content of Record. All records must document specific required items.	
A0461	STANDARD: Medical Records Services All records must document evidence of an updated entry documenting an	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 19

DATA TAG	REQUIREMENT	COMMENTS
A0463	STANDARD: Content of Record. Diagnosis. All records must document an admission diagnosis.	
A0464	STANDARD: Content of Record – Consults All records must document results of all consultative evaluations of patient	
A0465	STANDARD: Content of Record – Complications. All records must document complications, hosp. acquired	
A0466	STANDARD: Content of Record – Informed Consent. All records must contain properly executed informed consent	
A0467	STANDARD: Content of Record – Other Info. All records must document all practitioners orders, nursing notes, tx	
A0468	STANDARD: Content of Record – Discharge Summary. All records must include a discharge summary w outcome,	
A0469	STANDARD: Content of Record – Discharge Diagnosis. All records must include final diagnosis and records completed	
A0490	CONDITION OF PARTICIPATION: PHARMACEUTICAL SERVICES. The hosp. must have pharm svcs to meet the needs of their patients.	
A0491	STANDARD: PHARMACY ADMINISTRATION. The pharmacy & drug storage must be administered according to professional principles.	
A0492	STANDARD: Pharmacist Responsibilities. A full time, part-time, or consulting pharmacist must be responsible for	
A0493	STANDARD: Pharmacy Personnel. The pharmaceutical service must have adequate staff to respond to ensure	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 20

DATA TAG	REQUIREMENT	COMMENTS
A0494	STANDARD: Pharmacy Drug Records. Current and accurate records must be kept of receipt & distribution of all	
A0500	STANDARD: CONTROL & DISTRIBUTION OF DRUGS. For safety, all drugs & biologs must be controlled & distrib std of pract.	
A0501	STANDARD: Pharmacist Supervision of Services. All compounding, packaging, & dispensing of drugs must be under.	
A0502	STANDARD: Locked Storage Area. All drugs & biologs must be kept in a secure area, and locked when appropriate.	
A0503	STANDARD: Controlled Drugs Kept Locked. Schedule II, III, IV, & V medications must be kept locked within a secure area.	
A0504	STANDARD: Access to Locked Areas. Only authorized personnel may have access to locked areas.	
A0505	STANDARD: Unusable Drugs Not Used. Outdated, mislabeled, or otherwise unusable drugs & biologs must not be	
A0506	STANDARD: After-Hours Access to Drugs. When pharmacist not avail, drugs removed only by designated,	
A0507	STANDARD: Stop Orders for Drugs. Drugs not specifically prescribed as to time or # of doses must automatically	
A0508	STANDARD: Reporting Complications. Drug admin errors, ADR's, & incompatibilities must be immediately	
A0509	STANDARD: Reporting Abuses/Losses of Drugs. Abuses & losses of controlled substances must be reported to person	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 21

DATA TAG	REQUIREMENT	COMMENTS
A0510	<p>STANDARD: Staff Access to Drug Information. Drug information, S/E, toxicology, dosing, etc. must be available to the</p>	
A0511	<p>STANDARD: Formulary System. A formulary system must be established by the medical staff to assure quality pharmaceuticals at...</p>	
A0528	<p>CONDITION OF PARTICIPATION: RADIOLOGIC SERVICES. The hosp must maintain or have avail radiology services</p>	
A0529	<p>STANDARD: SCOPE OF RADIOLOGIC SERVICES The hosp must maintain or have avail radiology services to meet pt needs.</p>	
A0535	<p>STANDARD: SAFETY POLICIES AND PROCEDURES. The xray services must be free from hazards to pts. & staff</p>	
A0536	<p>STANDARD: Safety for Patients & Personnel. Proper safety precautions must be maintained against radiation hazards.</p>	
A0537	<p>STANDARD: Periodic Equipment Maintenance. Periodic inspection of equipment must be made, and hazards identified must</p>	
A0538	<p>STANDARD: Monitoring Radiation Exposure. Radiation workers must be checked periodically by use of exposure meters</p>	
A0539	<p>STANDARD: Medical Orders for Radiology Svcs. Xray services must be provided only on order of a practitioner with clinical</p>	
A0545	<p>STANDARD: PERSONNEL. The hosp. must ensure that specific radiology personnel requirements are met.</p>	
A0546	<p>STANDARD: Radiologist Responsibilities. A qualified full, part-time, or consulting radiologist must supervise</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 22

DATA TAG	REQUIREMENT	COMMENTS
A0547	STANDARD: Qualified Staff. Only personnel designated as qualified by med staff may use the xray	
A0553	STANDARD: RECORDS FOR RADIOLOGIC SERVICES. Records of radiologic services must be maintained.	
A0554	STANDARD: Authenticated Radiology Reports. The radiologist or practitioner performing tests must sign reports of his/her interpretations.	
A0555	STANDARD: 5 Year Retention of Records. The hosp. must maintain films, scans, other images, reports, printouts for at least 5 years.	
A0576	CONDITION OF PARTICIPATION: LABORATORY SERVICES. The hosp must maintain or have avail adequate lab services to meet pt. needs	
A0582	STANDARD: ADEQUACY OF LAB SERVICES. Hosp must have lab svcs avail direct or by contract to meet CLIA stds.	
A0583	STANDARD: Emergency Lab Services. Emergency Lab services must be available 24/7.	
A0584	STANDARD: Written Description of Services. A written description of services provided must be available to medical staff.	
A0585	STANDARD: Written Protocol for Specimens. The lab must make provisions for proper receipt and reporting of tissue specimens.	
A0586	STANDARD: Policies for Lab Services. Med Staff & pathologist must determine which specimens require macro & micro examination.	
A0592	STANDARD: HIV LOOK BACK. Potentially HIV infectious blood collected from previously neg donor records avail.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 23

DATA TAG	REQUIREMENT	COMMENTS
A0618	<p>CONDITION OF PARTICIPATION: FOOD & DIETETIC SERVICES. Hosp must have organized dietary service directed & staffed by adeq...</p>	
A0619	<p>STANDARD: ORGANIZATION OF DIETARY SERVICES. Hosp must ensure specific food & dietetic svc requirements are met.</p>	
A0620	<p>STANDARD: Director of Dietary Services. Hosp. must have full time employee serving as director of food & dietary services & is responsible ...</p>	
A0621	<p>STANDARD: Qualified Dietitian. There must be a qualified dietitian full time, part time or on consulting basis.</p>	
A0622	<p>STANDARD: Competent Dietary Staff. There must be admin and technical personnel competent in their respective duties.</p>	
A0628	<p>STANDARD: Menus. Menus must meet the needs of the patients.</p>	
A0629	<p>STANDARD: Therapeutic Diets. Therapeutic diets must be prescribed by practitioner responsible for care of the patient.</p>	
A0630	<p>STANDARD: DIETS. Nutritional needs must be met in accordance with recognized dietary practices.</p>	
A0631	<p>STANDARD: Therapeutic Diet Manual. A current therapeutic diet manual approved by dietitian & med staff must be available...</p>	
A0652	<p>CONDITION OF PARTICIPATION: UTILIZATION REVIEW. Hosp. must have an effective UR plan that provides for review of services...</p>	
A0653	<p>STANDARD: APPLICABILITY. In effect unless QIO has binding contract for review.</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 24

DATA TAG	REQUIREMENT	COMMENTS
A0654	STANDARD: UR COMMITTEE. UR committee consisting of 2 practitioners must carry out the UR function.	
A0655	STANDARD: SCOPE & FREQ OF REVIEW. UR plan must provide for review of medical necessity for Medicare/caid pt	
A0656	STANDARD: DETERMINATION OF MEDICAL NECESSITY. Determination of med necessity of admission or continued stay may be...	
A0657	STANDARD: EXTENDED STAY REVIEW. In non PPS hospitals, UR committee must make periodic review as specified in UR plan.	
A0658	STANDARD: REVIEW OF PROFESSIONAL SERVICES. UR committee must review professional services provided.	
A0700	CONDITION OF PARTICIPATION: PHYSICAL ENVIRONMENT. Hosp. must be constructed, arranged & maintained to ensure pt. safety.	
A0710	STANDARD: MAINTENANCE OF PHYSICAL PLANT. The condition of the physical plant must be developed & maintained to ensure...	
A0702	STANDARD: Emergency Power & Lighting. There must be emergency power & lighting in OR, RR, ICU, ER & stairwells. Flashlights in other	
A0703	STANDARD: Emergency Gas & Water. There must be facilities for emergency gas & water supply.	
A0709	STANDARD: LIFE SAFETY FROM FIRE. Hosp must ensure specific LSC requirements are met.	
A0710	STANDARD: Life Safety from Fire. Hosp. must meet LSC codes of NFPA.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 25

DATA TAG	REQUIREMENT	COMMENTS
A0711	STANDARD: Emergency Lighting/Batteries. Beginning 3/13/06, hospitals must be in compliance with chap. 19.2.9 lighting.	
A0712	STANDARD: ROLLER LOCKS. Beginning 3/13/06, chap 19.3.6.3.2 exception #2 does not apply to hospitals.	
A0713	STANDARD: Disposal of Trash. Hosp. must have provisions for routine storage & prompt disposal of trash	
A0714	STANDARD: Fire Control Plans. Hosp. must have written fire control plans w provisions for reporting, extinguishing fires, protect pts.,...	
A0715	STANDARD: Regular Fire and Safety Inspections. Hosp. must maintain evidence of regular inspection & approval by state	
A0716	STANDARD: Alcohol Based Hand Rub Dispensers. Hosp. may install ETOH based hand rub dispensers if	
A0722	STANDARD: Facilities. Hosp must maintain adequate facilities for services provided.	
A0723	STANDARD: Location of Facilities. Diagnostic & therapeutic facilities must be located for the safety of patients.	
A0724	STANDARD: Facilities, Supplies, Equipment Maintenance. Facilities, supplies, equipment must be maintained to acceptable level of safe..	<i>Outdated Supplies ER Surg Med.</i>
A0725	STANDARD: Complexity of Facilities. The extent & complexity of facilities must be determined by services offered.	
A0726	STANDARD: Ventilation, Light, Temperature Controls. Must be proper ventilation, light, and temp in pharm, food, other areas.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 26

DATA TAG	REQUIREMENT	COMMENTS
A0747	<p>CONDITION OF PARTICIPATION: INFECTION CONTROL. Hosp. must provide sanitary environment to avoid sources of...</p>	
A0748	<p>STANDARD: INFECTION CONTROL OFFICER. A person must be designated as I.C. officer to develop & implement...</p>	
A0749	<p>STANDARD: I.C. Officer Responsibilities. The I.C.O. must develop a system for ID, reporting, investigating, &</p>	
A0750	<p>STANDARD: Infection Control log. The ICO must maintain a log of incidents related to infections and communicable diseases.</p>	
A0756	<p>STANDARD: Leadership Responsibilities. CEO, Med Staff, & DON must ensure hosp-wide QA program & training address IC</p>	
A0799	<p>CONDITION OF PARTICIPATION: DISCHARGE PLANNING. Hosp must have a discharge planning process applicable to all patients.</p>	
A0800	<p>STANDARD: CRITERIA FOR DISCHARGE EVALUATIONS. Hosp must id at early stage, all pts. who would be affected if no dis. plan</p>	
A0806	<p>STANDARD: Discharge Planning Needs Assessment Hosp must provide disch. planning eval for pts. identified and other</p>	
A0807	<p>STANDARD: Qualified Discharge Planning Personnel. An RN, SW or other qualified person must develop or supervise develop...</p>	
A0808	<p>STANDARD: Post-Hospital Services. Dis. Plan eval must include eval of need for post-hosp svcs and availability of services.</p>	
A0809	<p>STANDARD: Self Care Patient Evaluation. The disch. plan eval must include a pt. self care evaluation or eval of return to pre admission</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 27

DATA TAG	REQUIREMENT	COMMENTS
A0810	STANDARD: Timely Discharge Planning Evals. Hosp. must complete the eval on a timely basis so appropriate	
A0811	STANDARD: Documentation of Evaluations. Hosp. must include disch eval in pt. record for use in establishing discharge plan and must	
A0817	STANDARD: DISCHARGE PLAN. Hospital must ensure that specific discharge plan requirements are met.	
A0818	STANDARD: Qualified Personnel. An RN, SW, or appropriately qualified personnel must develop or supervise development of a discharge plan	
A0819	STANDARD: Physician Request for Discharge Plan. If hosp. feels pt does not need discharge plan, physician may request	
A0820	STANDARD: Implementation of Discharge Plan. Hosp. must arrange for initial implementation of patient discharge	
A0821	STANDARD: Reassessment of Discharge Plan. Hosp. must reassess if factors that may affect continuing care needs change.	
A0822	STANDARD: Preparation for Discharge. As needed, patient & family may be counseled to prepare for post hospital care.	
A0823	STANDARD: List of Home Health Agencies. Hosp. must include in disch. plan a list of HHA's participating in Medicare &	
A0824	STANDARD: List of SNF's Hosp. must include in disch. plan a list of SNF's participating in Medicare & in patient area.	
A0825	STANDARD: List of Available Facilities. This list for patients for whom HHA or SNF's are indicated and are appropriate for the patient.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 28

DATA TAG	REQUIREMENT	COMMENTS
A0826	STANDARD: Managed Care Organizations. For pts in managed care organizations, indicating availability of participating	
A0827	STANDARD: Discharge Planning Document. Hosp. must document in pt. med record that the list was presented to pt or representative.	
A0828	STANDARD: Freedom to Choose Facilities. Hosp. must inform pt or family of right to choose among participating facilities.	
A0829	STANDARD: Respecting Family Preferences. The hosp. when possible must respect family preferences when they are expressed.	
A0830	STANDARD: Complete List of Qualified Providers. Hosp must not specify or limit the qualified providers available to the patient.	
A0831	STANDARD: Disclosing Financial Interest. Discharge plan must identify HHA or SNF in which hosp has a disclosable financial interest.	
A0837	STANDARD: TRANSFER OR REFERRAL. Hosp. must transfer or refer pts, with info to facilities as needed.....	
A0843	STANDARD: REASSESSMENT OF DISCH. PLANNING PROCESS. Hosp. must reassess planning process on an ongoing basis.	
A0884	CONDITION OF PARTICIPATION. ORGAN, TISSUE, EYE PROCUREMENT. Hosp must ensure OPO requirements are met.	
A0885	STANDARD: WRITTEN P&P. Hosp must have and implement P&P to address organ procurement responsibilities.	
A0886	STANDARD: OPO Agreement. Written protocols must include agreement with an OPO designated under 42 CFR part 486	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 29

DATA TAG	REQUIREMENT	COMMENTS
A0887	STANDARD: Tissue & Eye Bank Agreements. Protocols must include agreements with at least 1 tissue & eye bank to cooperate with retrieval of	
A0888	STANDARD: Informed Family. Written protocols must ensure with OPO that family of each potential donor is informed of options to donate	
A0889	STANDARD: Designated Requestor. Individual designated by hospital to make request must be representative of OPO or designated requestor	
A0890	STANDARD: Discretion and Sensitivity. Written protocols must encourage discretion and sensitivity with respect to circumstances, views,	
A0891	STANDARD: Staff Education. Written protocols must ensure hosp. works with OPO to educate staff on donation issues.	
A0892	STANDARD: Death Record Reviews. Written protocols must ensure hosp works with OPO in review of death records to improve ID of potential...	
A0893	STANDARD: Maintain Potential Donors. Written protocols must ensure that the hosp. works with the OPO in maintaining potential donors while...	
A0899	STANDARD: OPTN MEMBERSHIP. organ transplant hospitals must be members of OPTN network.	
A0940	CONDITION OF PARTICIPATION SURGICAL SERVICES. If provided, surg services must be well organized and according to stds.	
A0942	STANDARD: OR Supervision. OR's must be supervised by experienced RN or MD/DO	
A0943	STANDARD: OR Scrub Nurses. LPN's and OR Techs may serve as scrub nurses under supervision of RN.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 30

DATA TAG	REQUIREMENT	COMMENTS
A0944	STANDARD: OR Circulating Nurses. Qualified RN's may perform circulating duties in the OR. LPN or ORT may assist only.	
A0945	STANDARD: Surgical Privileges. Surgical privileges must be delineated for all practitioners performing surgery according to competency of...	
A0951	STANDARD: OR POLICIES. Surgical services must be consistent with needs and resources. Policies must be designed to assure...	
A0952	STANDARD: H&P Workup. There must be an H&P workup on the chart of every patient prior to going to surgery except in emergency.	
A0955	STANDARD: Informed Consent. A properly executed informed consent must be in the patient chart before surgery.	
A0956	STANDARD: Required OR Equipment. The following equipment must be avail in OR's; call system, card. mon, resuscitator, defib, sx, trach	
A0957	STANDARD: Post-Op Care. There must be adequate provision for post op care.	
A0958	STANDARD: OR Register. The OR register must be complete and up to date.	
A0959	STANDARD: Operative Report. Op report describing techniques, findings, and tissue removed must be written immediately after surgery.	
A1000	CONDITION OF PARTICIPATION: ANESTHESIA SERVICES. If hosp provides anesthesia svcs, must be well organized under MD super...	
A1001	STANDARD: ORGANIZATION OF ANESTHESIA SERVICES. Organization of anesthesia svcs must be appropriate to scope of service..	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 31

DATA TAG	REQUIREMENT	COMMENTS
A1002	STANDARD: Pre-Anesthesia Evaluation. Anes. svcs must be consistent w needs & resources. P&P on anes. must delineate pre & post	
A1003	STANDARD: Anesthesia Record. Policies must ensure intra-operative anesthesia record is provided for every patient.	
A1004	STANDARD: Inpatient Post Anesthesia Evaluation. For In. pt., post anesthesia eval must be completed & documented by	
A1005	STANDARD: OP Post Anesthesia Evaluation. For In. pt., post anesthesia eval must be completed & documented for each patient.	
A1026	CONDITION OF PARTICIPATION: NUCLEAR MEDICINE SERVICES. If Nuc. Med. Svc. provided, must meet the needs of the patients accord...	
A1027	STANDARD: ORGANIZATION OF NUC. MED. SERVICES. organization must be appropriate to scope of service provided.	
A1028	STANDARD: Director of Nuc, Med. Svcs. There must be a director of services who is an MD or DO qualified in Nuc. Med.	
A01029	STANDARD: Nuclear Medicine Policies. Qual, training, functions, & responsibilities of personnel must be specified by svc. director.	
A1035	STANDARD: RADIOACTIVE MATERIALS. radioactive materials must be prepared, labeled, used, transported, stored, disposed of...	
A1036	STANDARD: Prep of Radiopharmaceuticals. In house prep of radiopharmaceuticals is by or supervised by properly trained RPH	
A1037	STANDARD: Disposal of Radioactive Materials. There is proper storage and disposal of radioactive materials.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 32

DATA TAG	REQUIREMENT	COMMENTS
A1038	STANDARD: Nuc. Med. Lab Services. If lab tests are performed in the Nuc. Med. Svc, the lab must meet	
A1044	STANDARD: EQUIPMENT & SUPPLIES. Equip. & supplies must be appropriate for types of svcs provided.	
A1045	STANDARD: Equipment Maintenance. Equipment must be maintained in safe operating condition, inspected, tested &	
A1051	STANDARD: Nuclear Medicine Records. Hosp. must maintain signed and dated reports of interpretations, consultations.	
A1052	STANDARD: 5 Year record Storage. Hosp. must maintain Nuc. Med. Records for at least 5 years.	
A1053	STANDARD: Authenticated and Dated Reports. Practitioner approved to interpret diagnostic procedures must sign and date the interpretations.	
A1054	STANDARD: Records of Radiopharmaceuticals. Hospital must retain records of receipt and distribution of	
A1055	STANDARD: Medical Orders. Nuclear Med. Services must be ordered by a practitioner authorized	
A1076	CONDITION OF PARTICIPATION: OUTPATIENT SERVICES. If provided, outpatient services must meet needs of patients.	
A1077	STANDARD: INTEGRATION OF OUTPATIENT SERVICES. Outpatient services must be appropriately organized and integrated	
A1079	STANDARD: OUTPATIENT SERVICES PERSONNEL. Hosp. must assign 1 person to be responsible for OP svcs.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 33

DATA TAG	REQUIREMENT	COMMENTS
A1100	<p>CONDITION OF PARTICIPATION: EMERGENCY SERVICES. Hosp. must meet emergency needs of pts. according to stds.</p>	
A1101	<p>STANDARD: ORGANIZATION & DIRECTION. Hosp. must ensure that specific emergency svcs. org & dir requirements are met.</p>	
A1102	<p>STANDARD: Organization of Emergency Services. The services must be organized under direction of qualified member of medical staff.</p>	
A1103	<p>STANDARD: Integration of Emergency Services. The services must be integrated with other departments of the hospital.</p>	
A1104	<p>STANDARD: Emergency Services Policies. P&P governing medical care in ED are established by and are continuing</p>	
A1110	<p>STANDARD: EMERGENCY SERVICES PERSONNEL. Hosp. must ensure specific emergency svcs personnel req's are met.</p>	
A1111	<p>STANDARD: Supervision of Emergency Services. Emergency Services must be supervised by a qualified member of</p>	
A1112	<p>STANDARD: Qualified Emergency Services Personnel. There must be adequate medical and nursing personnel</p>	
A1123	<p>CONDITION OF PARTICIPATION: REHABILITATION SERVICES. If hosp provides PT, OT,ST services, must be organized and staffed.....</p>	
A1124	<p>STANDARD: ORGANIZATION OF REHAB SERVICES. The organization of the service must be appropriate to services offered.</p>	
A1125	<p>STANDARD: Director of Rehab Services. Dir. of rehab must have necessary knowledge, experience, and</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 34

DATA TAG	REQUIREMENT	COMMENTS
A1126	STANDARD: Qualified Rehab Services Staff. PT, OT, ST, audiology services if provided, must be by staff meeting	
A1132	STANDARD: WRITTEN PLAN OF REHAB TX. Services must be provided according to a written plan of treatment.	
A1151	CONDITION OF PARTICIPATION: RESPIRATORY CARE SERVICES. If the hosp. provided Resp Care Svcs, must meet needs of patients	
A1152	STANDARD: ORGANIZATION OF RESPIRATORY CARE SERVICES. Organization of RT services must be appropriate to services provided.	
A1153	STANDARD: Director of RT Services Dir. of RT must have necessary knowledge, experience, and capabilities to properly supervise...	
A1154	STANDARD: Adequate RT Staff. There must be adequate numbers of qualified RT staff to meet patient needs.	
A1160	STANDARD: RT CARE POLICIES. Services must be delivered in accordance with medical staff directives.	
A1161	STANDARD: RT Care Personnel Policies. Personnel qualified to perform specific procedures and amt. of supervision must be written....	
A1162	STANDARD: Blood Gas/Lab Test Requirements. If ABG's or other lab tests are performed in RT care unit, unit must meet lab	
A1163	STANDARD: Medical Orders for RT Services. Services must only be provided with and according to orders of MD/DO.	
A1500	CONDITION OF PARTICIPATION: SPECIAL CONDITIONS FOR HOSP A hosp that has a medicare # must meet specific requirements...ext. care..	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 35

DATA TAG	REQUIREMENT	COMMENTS
A1501	STANDARD: ELIGIBILITY: The facility has less than 100 beds excluding newborn and ICU beds	
A1502	STANDARD: ELIGIBILITY: The hospital is located in a rural area.	
A1503	STANDARD: ELIGIBILITY: The hospital does NOT have a 24 hour nursing waiver granted.	
A1504	STANDARD: ELIGIBILITY: The hospital has not had swing bed approval terminated within 2 years previous to application.	
A1505	STANDARD: SKILLED NURSING FACILITY SERVICES. The facility must be in substantial compliance with following SNF requirements.....	
A1508	STANDARD: Resident Rights. The resident has a right to a dignified existence, self-determination, and communication with and access to...	
A1509	STANDARD: Resident Rights. The resident has the right to refuse treatment, participate in experimental research, & formulate Adv. Dir.	
A1510	STANDARD: Resident Rights. The facility must inform each resident entitled to Medicaid benefits in writing, at time of admission.....	
A1511	STANDARD: Personal Physician. The resident has the right to choose a personal physician.	
A1512	STANDARD: Changes In Care. The resident has the right to be fully informed in advance of changes in care and treatment.....	
A1513	STANDARD: Participate in Planning of Care. The resident has the right, unless adjudged incompetent, to participate in planning care/treatment.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 36

DATA TAG	REQUIREMENT	COMMENTS
A1514	<p>STANDARD: Privacy & Confidentiality. The resident has the right to personal privacy and confidentiality of his/her</p>	
A1515	<p>STANDARD: Work. The resident has the right to refuse to perform services for the facility, or to perform services if desired...</p>	
A1516	<p>STANDARD: Mail. The resident has the right to privacy in written communication, including right to send and receive mail.....</p>	
A1517	<p>STANDARD: Access & Visitation Rights. The resident has the right, and the facility must provide immediate access to any resident by any.....</p>	
A1518	<p>STANDARD: Personal Property. The resident has the right to retain and use personal property.</p>	
A1519	<p>STANDARD: Married Couples. The resident has the right to share his/her room with a spouse when both reside and consent to share....</p>	
A1522	<p>STANDARD: Admission, Transfer, & Discharge. Transfer and discharge refer to movement of a resident to a bed outside of the facility.....</p>	
A1523	<p>STANDARD: Transfer, Discharge. The facility must permit each resident to remain in the facility, and not transfer/discharge the resident unless..</p>	
A1524	<p>STANDARD: Documentation. When the facility transfers or discharges a resident under any of the circumstances above, the record....</p>	
A1525	<p>STANDARD: Notice Before Transfer. Before the facility transfers or discharges a resident, the facility must notify the resident and family.....</p>	
A1526	<p>STANDARD: Timing of the Notice. Except when specified..., the notice of transfer/discharge must be made 30 days prior to the transfer/discharge..</p>	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 37

DATA TAG	REQUIREMENT	COMMENTS
A1527	STANDARD: Contents of Notice. The written notice specified must contain the following; reason, date, destination, appeal rights,.....	
A1528	STANDARD: Orientation for Discharge. The facility must provide adequate preparation and orientation to residents to ensure a safe and	
A1531	STANDARD: Restraints. The resident has the right to be free from any physical or chemical restraints imposed for the purpose....	
A1532	STANDARD: Abuse. The resident has the right to be free from physical, verbal, sexual, mental abuse, corporal punishment, invol...	
A1533	STANDARD: Staff Treatment of Residents. The facility must develop and implement p&p that prohibit mistreatment, neglect, and abuse....	
A1534	STANDARD: Staff Treatment of Residents. The facility must not employ individuals who have been found	
A1537	STANDARD: Patient Activities. The facility must provide for an ongoing activity program designed to meet the needs of the residents.....	
A1538	STANDARD: Social Services. The facility must provide medically-related social services to attain or maintain the highest possible.....	
A1541	STANDARD: Discharge Planning. When the facility anticipates discharge, the resident must have a discharge summary that includes	
A1544	STANDARD: Specialized Rehab Services. If specialized rehab services (OT,PT,ST.) are offered, and required	
A1545	STANDARD: Qualifications. Specialized Rehab services must be provided under MD order by qualified staff.	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 38

DATA TAG	REQUIREMENT	COMMENTS
A1548	STANDARD: Dental Services. The facility must assist residents in obtaining routine and emergency dental services.	
A1549	STANDARD: Dental Services. The facility must provide or obtain from outside sources dental services to meet the needs of the residents.	
A1550	STANDARD: Dental Services. The facility must, if necessary, assist the resident in making appointments...	
A1551	STANDARD: Dental Services. The facility must provide or obtain from outside sources routine or emergent dental services to meet	
A1552	STANDARD: Dental services. The facility must, if necessary, assist the resident in making appointments...	
	EMTALA REGULATIONS;	
A2400	COMPLIANCE WITH CFR 489.24 The provider agrees, in the case of a hospital as defined in CFR 489.24. to comply with CFR 489.24.	
A2401	STANDARD: Receiving an Unstable Transfer. The provider agrees..., to report to CMS or to the state survey agency any time it has reason to	
A2402	STANDARD: Posting Of Signs. The provider agrees....., to post conspicuously in any emergency dept. or in a place or places likely.....	
A2403	STANDARD: Hospital Must Maintain Records: The provider agrees....., to maintain medical and other records related to individuals transferred to or	
A2404	STANDARD: On-Call Physicians. The hospital (trans & rec.) must maintain a list of MD's who are on call for duty after initial exam to provide...	

ACUTE CARE HOSPITAL POLICY REVIEW FORM 39

DATA TAG	REQUIREMENT	COMMENTS
A2402	STANDARD: Posting Of Signs. The provider agrees....., to post conspicuously in any emergency dept. or in a place or places likely.....	
A2403	STANDARD: Hospital Must Maintain Records: The provider agrees....., to maintain medical and other records related to individuals transferred to or	
A2404	STANDARD: On-Call Physicians. The hospital (trans & rec.) must maintain a list of MD's who are on call for duty after initial exam to provide...	
A2405	STANDARD: Emergency Room Log. The provider agrees (trans & rec)to maintain a central log on each individual who comes to the ER....	
A2406	STANDARD: Medical Screening Exam. In the case that the hosp. has an emergency dept,if indiv. comes to ER with emergency cond. a MSE perf....	
A2407	STANDARD: Stabilizing Treatment. If indiv. comes to ER, has emergency condition per MSE, facility must provide stabilizing tx, or transfer...	
A2408	STANDARD: Delay in Exam or Treatment. Participating hosp. must not delay MSE, or further exam or tx, in order to ask payment or insurance	
A2409	STANDARD: Appropriate Transfer. If individual has EMC that has not been stabilized, the hosp. may not transfer unless appropriate and request	
A2410	STANDARD: Whistleblower Protections. A participating hosp. may not penalize or take action against MD because MD refuses to transfer.....	
A2411	STANDARD: Recipient Hospital Responsibilities. A participating hosp that has specialized capabilities or facilities may not refuse	
A9999	Closing Comments.	