POLICY | PURPOSE STATEMENT:

- To allow each clinical staff member to act within their level of training and licensure, so that the care team can achieve the highest quality in patient care.
- To provide preventative and diagnostic services, in a timely manner, that are needed for management of medications, chronic diseases and for health maintenance.
- To facilitate the population health management goals set by the Health Resources Services Administration.

SCOPE: This policy applies to all clinic staff and all patients of Larry Combest Community Health and Wellness Center Clinics.

DEFINITIONS:

- Primary Care Provider (PCP) – Is a Nurse Practitioner (NP) who is responsible for patient care and sees regularly for wellness, acute illness, and urgent needs.
- Provider – Nurse Practitioner taking walk-ins as available and not necessarily the PCP.
- Patient Services Specialist (PSS) – Front desk clerical staff.
- Standing Order: An order for a specific patient-care activity that may be applied to a patient meeting the order criteria.
- Licensure: Advance Practice Registered Nurse (APRN), Registered Nurse (RN) or Licensed Vocational Nurse (LVN)

PROCEDURE:

1. Standing orders will be reviewed by the Performance Improvement Committee and Provider Group prior to implementation.
2. LCCHWC will permit appropriately skilled and licensed clinical staff to execute Standing Orders. Staff must be oriented to Standing Orders prior to using them.
STANDING ORDERS FOR SENIOR HOUSE CALLS:

- For complaint of pain or burning with urination, increased frequency of urination, foul odor from urine or altered mental status in geriatric patients, a urine analysis may be ordered in the Electronic Medical Record (EMR) for the patient's Primary Care Provider (PCP).
- For reports from Home Health RN or LVN of fever, cough, abnormal breath sounds, or patient complaint of shortness of breath, a chest x-ray may be ordered. Order will be noted in the EMR for the patient’s PCP. Results will be obtained for the PCP’s review.
- For patient fall with complaint of pain at the area of injury, an x-ray may be ordered of the affected area.
- Instruct patient to follow a BRAT diet when experiencing nausea and/or vomiting.
- Instruct patient with complaint of constipation to increase fluid intake and decrease intake of pain medications.
- Medications for chronic disease management may be refilled for 3 months if patient has kept Provider follow-up appointments.
- Patients experiencing signs or symptoms of myocardial infarction or stroke will be referred to Emergency Medical Services and/or Emergency Department immediately. (Patients without care provider may need assistance calling 911 from staff member.)
- Home Health Lab Work Orders: An order may be given to obtain a Hgb A1c or TSH, if one has not been done in the last 3 months, when needed. An order may be given for baseline labs, which includes CBC, CMP, Vitamin D Level, Vitamin B12 Level and folic acid level, if these labs have not been done in the past year.

STANDING ORDERS FOR COMBEST LUBBOCK CLINICS:
These orders will apply to patients that are in clinic, and registered by the Business office, to be seen by their Provider.

- **LAB ORDERS:** Hgb A1c POC (point-of-care) for diabetic patients that have not had test done in the last 3 months. Glucose finger stick for patients showing signs of hypoglycemia. Urinalysis for patients with dysuria and/or bladder complaints. For complaint of sore throat with fever, POC rapid strep test. For complaint of flu-like symptoms during flu season, POC flu test. POC urine pregnancy as needed. Home
Ambulatory Policy and Procedure

Fecal immunochemical testing kit for POC testing annually for patients age 50 and older, unless they have had a colonoscopy in the past 10 years. Self-pay patients who need FQHC Pricing and have written orders for lab work from their specialty physician may have orders placed under their PCP with a Provider approval. Results will be delivered to specialty physician by EMR or fax.

- **RADIOLOGY:** Spot compression and/or ultrasound studies for abnormal mammograms, as per the recommendation of the consulting radiologist.
- **REFERRALS:** Diabetes education for newly diagnosed diabetics, for diabetics requesting diabetes education and/or diabetes not well controlled with Hgb A1c >7. Eye exam for diabetics yearly. Refer and/or report STD (sexually transmitted disease) positive patients as per DSHS policy.
- **ASTHMA:** Spirometry readings on all patients.
- **IMMUNIZATIONS:** Use TVFC and ASN Standing Orders for patients that qualify for these programs. Routine childhood immunizations as per CDC guidelines. Influenza vaccine yearly for patients that meet recommendations of the CDC. Tdap booster every 10 years. TB testing by PPD as needed. PCV13 and PPSV23 vaccine as per CDC recommendations.

**MEDICATION REFILLS:** Health maintenance medications for chronic health conditions may be refilled with the following provisions:

- Medications may be refilled as they are documented in the EMR. No change will be made to the dosage or frequency of dose. The patient must have kept or rescheduled follow up appointments. The patient must have been seen in clinic in the past 6 months. The maximum refill is for a 30 day supply with 3 refills. The number of refills will reflect when the patient needs to return to clinic for follow up.
- Controlled substance refills will be filled by the Provider only. Antibiotic medication refills will be filled by the Provider only.
- Patient prescriptions for chronic health conditions that request a conversion through their pharmacy to a 90 day supply may be entered without change to dosage or frequency of dose. One refill is allowed as long as the prescription does not exceed the time when a follow-up provider visit is due.

- **CHEST PAIN:** Patients that walk-in or have a scheduled appointment, who are complaining of chest pain, will be evaluated by a RN using the Chest Pain Protocol. 12 lead EKG will be run in first 10 minutes of RN exam. (Attached)
- **EKG:** 12 lead EKG may be ordered for patients with cardiac or medication history indicating a need for evaluation of EKG.
- **RESPIRATORY:** Patients with respiratory distress, that are on albuterol handheld nebulizer (HHN) treatments at home, may receive one initial HHN treatment with albuterol, with auscultation of breath sounds before and after treatment documented in EMR.
Ambulatory Policy and Procedure

- **ANTICOAGULATION:** Patients on anticoagulants may be managed by the Advance Practice Registered Nurse (APRN) using the Anticoagulation Therapy Management Protocol. (Attached)

**STANDING ORDERS FOR ABILENE COMMUNITY HEALTH CENTER (ACHC)**

Lab Orders and Immunization Protocols apply to ACHC patients that are in the clinic and registered by the patient services specialist staff to be seen by a PCP or Provider.

**LAB ORDERS**

- Hgb A1c POC (point-of-care) – This testing may be ordered for diabetic patients who have not had a Hgb A1c test completed past 3 months.
- Glucose finger stick may be ordered for patients showing signs of hypoglycemia.
- Urinalysis may be ordered for patients with dysuria and/or bladder complaints.
- POC Rapid Strep Test may be ordered for complaint of sore throat with fever.
- POC Flu Test may be ordered for complaint of flu-like symptoms during flu season.
- POC Urine Pregnancy Test may be ordered for women who may be pregnant.
- CBC, CMP, TSH, and Lipid Panel may be ordered for all new patients.
- HIV Test may be ordered for high risk patients.

**IMMUNIZATION PROTOCOL**

**Immunization Protocol:** Standing prescription orders for the ACHC to administer immunizations will be followed if a pharmacist is available for injection and education (see Attachment C).

**RESPONSIBILITIES | REVIEW | REVISIONS:**

This Combest OP will be reviewed by June 1 of every odd-numbered year (ONY) by the Director of Clinical Operations, with recommendations for revision forwarded to the Executive Director of the TTUHSC SON LCCHWC by July 15.

**RIGHT TO CHANGE POLICY:**

TTUHSC SON Combest reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.
ATTACHMENTS:
Attachment A: Chest Pain Protocol
Attachment B: Anticoagulation Therapy Management Protocol
Attachment C: Abilene Community Health Center Immunization Protocol