



MEDICAL DIRECTIVE

Implementation of Specific Diagnostic Tests, Images & Scans by Nurse Practitioners – Post Acute Specialty Services (PASS) Program

Approved by: Medical Advisory Committee – February 28, 2012

Authorizing physician(s)

Post Acute Specialty Services (PASS) Program Physicians

Authorized to who

The Nurse Practitioner/RN(EC) of the Post Acute Specialty Service (PASS) Corporate Program who has completed a recognized university approved program and is registered in a specialty extended class with the College of Nurse of Ontario and holds clinical expertise in the care of complex continuing care, geriatrics and rehabilitation populations..

Patient Description / Population

- Post Acute Specialty Program Services (in/outpatient services at all four sites)

Medical Directive Description

The NP in the PASS Program by means of this medical directive implement the order for specific diagnostic tests, images and scans in order to:

- a) assist in the diagnosis of clinical problems or assessment of the clinical response to treatment interventions or,
- b) to rule out a potential diagnosis that if present, would require consultation with an appropriate physician for treatment and follow-up.

Test	Clinical Criteria	Contraindication
<u>Plain Film</u> Chest x-ray: single view, PA lateral, decubitus, rib views, portable	<ul style="list-style-type: none">• Acute dyspnea, respiratory distress• Significant abnormality in air entry: effusion, fluid overload, pneumothorax, atelectasis, consolidation or infiltrate suspected• Follow-up of previously abnormal x-ray finding such as pneumothorax, effusion, consolidation, infiltrate• Chest pain and/or clinical findings suggestive of injury	<ul style="list-style-type: none">• Consent for test denied by patient or SDM• Absence of clinical indication• Pregnancy
Abdominal x-ray: flat plate, 3 views	<ul style="list-style-type: none">• Verification of nasogastric/feeding tube placement• Vomiting	<ul style="list-style-type: none">• Consent for test denied by patient or SDM• Absence of clinical

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<p>KUB</p> <p>Modified Barium Swallow</p>	<ul style="list-style-type: none"> Acute abdominal pain or distention with accompanying clinical findings: Suspicion of calculi/obstruction Clinical symptoms/findings suggestive of gastrointestinal delay/obstruction, foreign body or stricture Investigation of abdominal/epigastric pain Criteria/recommendation from SLP 	<p>indication</p> <ul style="list-style-type: none"> Pregnancy
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Test	Clinical Criteria	Contraindication
X-ray of spine, joints, extremities, hand, feet	<ul style="list-style-type: none"> Acute spine, joint pain with accompanying clinical findings Pain/clinical findings suggestive of injury 	Consent for test denied by patient or SDM
Carotid Doppler	<ul style="list-style-type: none"> Clinical investigation following a TIA/Stroke Presence of a Carotid bruit with or without clinical symptomatology Clinical signs/symptoms of impaired arterial circulation 	Consent for test denied by patient or SDM
Venous/arterial leg dopplers	<ul style="list-style-type: none"> Clinical Signs of a deep vein thrombosis identified Clinical findings suggestive of Pulmonary Emboli Signs of venous disease where compression therapy may be indicated Signs of arterial disease 	Consent for test denied by patient or SDM
Echocardiogram	<ul style="list-style-type: none"> Investigation of left ventricular function, heart valve function, new murmurs/rubs with accompanying symptomatology, cardiac thrombus/infection 	Consent for test denied by patient or SDM
Other diagnostics (BMD, bone scans, Gallium), Ultrasound, CAT scans, MRI	<ul style="list-style-type: none"> Diagnosis, surveillance of systems 	Consent for test denied by patient or SDM

Specific conditions/circumstances that must be met before the Directive can be implemented

- The Nurse Practitioner (NP) and Physician partners will have a collaborative relationship and shared care philosophy
- Patients must be approved for admission to the program as per existing processes, criteria, policies and procedures and be medically stable
- The NP will have completed a full evaluation of the patient's status (history and physical examination) or will have reviewed the patient record and performed a patient assessment.

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- The NP will have completed an appropriate review of pertinent laboratory results, imaging, allergies, concurrent medications, possible drug interactions and co-morbid conditions prior to the initiation of the medical directive.

Contraindications to the implementation of the Directive

- Consent for treatment has been declined by patient/substitute decision maker after rationale and potential benefits reviewed

Identify relevant Delegated Control Act or Added Skill associated with this Directive

- Ordering the application of a form of energy as designated

Added Skills

- Knowledge of the best practice guidelines/patient care policies and procedures
- Identification of patient care issues that may complicate and/or prolong a patient's hospitalization
- Monitoring and evaluation of clinical outcomes of medical and nursing interventions

Documentation requirements

The intervention/ test will be written on the order sheet in the patient's health record as a medical directive including the time, date of ordering and the signature of the NP.

The indication/rationale for requesting the procedure will be documented in the progress note.

Review/Evaluation Process (how often/by who)

The medical directives will be reviewed on an annual basis with the physician (s), other relevant health care professionals in the program and the program administration.

Related Documents

References