وزارة الصحة Ministry of Health	المملكة العربية السعودية وزارة الصحة الادارة العامة للطب المنزلي	الطب المنزلي Home Medical Care
	Policy Number: HMC-IPSG-PPGs-1 (3)	
Title: Patient Identification	Replaces Number: 2	Issue Date : 11/05/2016
Applied To: All HMC Staff	Page :10f 2	Review Date : 11/05/2019

1. Purpose:

To ensure the accuracy of patient identifications by reliably identifying the individual as the person to whom the service is intended and matching the service to that individual.

2. Definition:

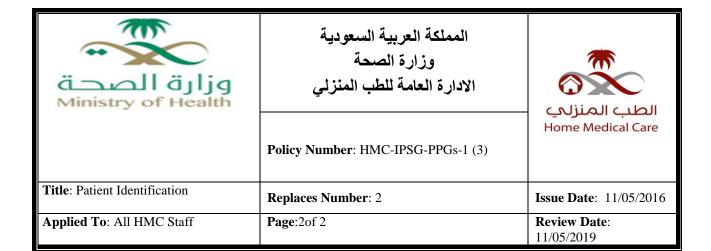
2.1 To identify the individual accurately as the person to whom the service is intended.

3. Policy:

- 3.1 Every patient should be identified using two identifiers (patient name and medical identification number)
- 3.2 Patient address/location should not be used to identify patients.
- 3.3 Every patient should be identified using the name(first, middle and family names)and medical record number in the following situations:
 - 3.3.1 Before starting the consultation with the home medical care professionals.
 - 3.3.2 Before receiving any specimen (urine, stool or swap) from the patient.
 - 3.3.3 Before withdrawal of blood from any patient.
 - 3.3.4 Before ordering any specific tests for the patient.
 - 3.3.5 Before receiving any lab/ imaging results including critical ones.
 - 3.3.6 Before administering any medication to the patient
 - 3.3.7 Before performing any procedure to the patient.
 - 3.3.8 Before dispensing themedications to the patient.

4. Procedure:

- 4.1.All patient receiving service byhome medical care personnel should have their identity checked using two identifiers (patient name & medical I.D Number) at all clinical encounters (see situations2.3.1-2.3.8) and during the patient home visit.
- 4.2. The name of the patient should be enquired about from the patient to confirm his / her identify by asking the patient for his full name (first, middle and last name)
- 4.3. In case of unresponsive, demented, mentally or retarded patient should be verified with the caregiver.



4.4. Patient home package provided to the patient / caregiver at first home visit including the patients name (first, middle & last name) plus the patient medical I.D numbers.

5. Responsibility:

5.1 All Home Medical Care Staff.

6. Forms:

N/A

7. References:

- 7.1 Policies and procedures guidelines of Home Medical Care Center, Home Medical Care Administration, Medina Munwara Region, 2016
- 7.2 Policies and procedures guidelines of Home Health Care Unit, Family and Community Medicine Department at Riyadh Military Hospitals, 2014
- 7.3 Joint Commission International Accreditation Standards for Home Care, 2012
- 7.4 MOH Home Medical Care Standard, 2015

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