



## Clinical Staff Executive Committee

### MEDICAL CENTER POLICY NO. 0109

- A. SUBJECT: Medical Orders for Patient Care
- B. EFFECTIVE DATE: July 1, 2012 (R)
- C. POLICY:

Physicians, Physician Assistants, and Nurse Practitioners (Licensed Independent Practitioners or LIPs<sup>1</sup>) at the University of Virginia Medical Center are responsible for ordering medical treatments, tests, diagnostic procedures and ordering medications. These actions are considered *medical orders*. All medical orders shall be documented in a patient's medical record *via* use of the electronic medical record system ("EMR"; see [Medical Center Policy No. 0094; Documentation of Patient Care in the Electronic Medical Record](#)). Medical orders shall be updated as often as necessary to remain current.

D. DEFINITIONS:

1. Actionable Order. A written, verbal, or electronic mail (e-mail) order that can be carried out by staff.
2. Written Order. An order that has been documented by the LIP in the EMR or on an approved documentation form during EMR downtime. Orders written on notepads, or progress notes are not considered written orders.
3. Verbal Order. An order that has been verbally relayed by an LIP either in person or via telephone to an authorized individual (see list in E.2.).
4. E-mail order. An order that is sent electronically by an LIP to an authorized individual (see list in E.2.) via the Medical Center's e-mail exchange server.
5. Pended Order. An order that has been entered into the EMR by an authorized individual (see lists in E. 4.) A pended order is not actionable and cannot be carried out by staff until it is signed by an LIP. Pended Orders include Order Sets and Protocol Orders.
6. Order Set. A group or collection of orders. An order set may be used to improve clinician efficiency or to operationalize a clinical pathway, guideline, or protocol. An order set may be part of a protocol. Order sets can be created at the clinical division, department, or at the institutional level. Order sets are not actionable until signed by an LIP.

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<sup>1</sup> For the purposes of this policy, licensed independent practitioner (LIP) includes physicians, physician assistants, and nurse practitioners.

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7. Protocol Order. An order that contains a specific, established set of actions. Protocol orders containing pre-established medical and/or nursing orders will be approved by the Medical Director and Manager of the applicable clinical area(s), unless superseded by institution-wide approval by the Patient Care Committee. (See [Medical Center Policy No. 0204; Clinical Pathways, Clinical Practice Guidelines, and Clinical Protocols](#).) Protocol orders are not actionable until signed by an LIP.
8. Outpatient Verbal Prescription Order. An order that is defined in the Virginia Code as a prescription that is “transmitted to the pharmacy of the patient’s choice by the prescriber or his authorized agent.”

E. PROCEDURE:

1. Written Orders

The LIP is responsible for the direct entry of medical orders into the EMR, or on approved documentation forms when the EMR system is down.

2. Verbal Orders

- a. Verbal orders are to be used infrequently and only in the following limited circumstances:
  - i. Medical emergency;
  - ii. The medical record is not available, as when the LIP is off site without computer access;
  - iii. The LIP is engaged in a patient care function, such as preparing for a sterile procedure, and interrupting that function will delay the delivery of urgent care or treatment.
- b. When a verbal order is given, the authorized individual receiving the order shall enter it in the EMR or on an approved documentation form during EMR downtime per [Medical Center Policy No. 0094; Documentation of Patient Care in the Electronic Medical Record](#) and read back details of the order to the LIP for verification. All verbal orders are expected to be co-signed promptly by the responsible LIP and within a period of time not exceeding 72 hours after the order is given.
- c. Individuals with authority to take and enter verbal orders from LIPs are:
  - i. Registered Nurses - All categories of orders;
  - ii. Pharmacists - Pharmacy and associated lab related orders only;
  - iii. Licensed Respiratory Care Practitioner - Medications related to respiratory care that have been approved by the Medical Director for Respiratory Care Services and procedures related to respiratory care;
  - iv. Certified Nutritionists, Registered Dietitians - Nutritional and dietary orders and labs for nutritional or dietary support;
  - v. Physician Assistants - Orders consistent with practice protocol with supervising physician. Only supervising physician or alternate supervising physicians may co-sign the verbal order;

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- vi. Other Allied Health Professional - Orders specific to scope of practice, e.g. physical therapy, occupational therapy;
- vii. Medical Students - All orders other than medication orders.

### 3. E-mail Orders

E-mail orders are allowable for use in clinics only and in limited circumstances when an LIP cannot access the EMR (for example, when the LIP is out of town). For purposes of maintaining confidentiality and security, e-mail orders shall be restricted to only e-mail accounts protected by the Medical Center's Secure Clinical Subnet "firewall", which are identified by having an "\*HS" after the sender's name. The LIP is responsible for following procedures as set forth in [Medical Center Policy No. 0193; Electronic Mail \(E-mail\)](#).

E-mail orders shall be sent to authorized individuals (see list in E.2.) who shall confirm to the responsible LIP that the order has been entered in the EMR. The authorized individual shall then print the e-mail and send it to HIS for scanning into the EMR.

### 4. Protocol Orders and Order Sets

- a. In the inpatient setting, Protocol Orders may be entered in the EMR by any of the authorized individuals listed in E.2.c.i-vii above.
- b. In the outpatient setting, Protocol Orders may be entered by the authorized individuals listed in E.2.c.i.-vii. above, and:
  - i. Certified Medical Assistants
  - ii. Licensed Practical Nurses
  - iii. LIPs' administrative assistants
- c. Order Sets may be entered in the EMR by any of the authorized individuals listed in E. 2.c.i. – vii. and 4.b.i. – iii. above, as well as:
  - i. Nurse practitioner students
  - ii. Physician assistant students

Protocol orders and order sets orders remain pended until signed by an LIP.

### 5. Outpatient Verbal Prescription Orders

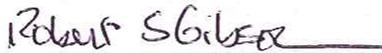
Virginia Code § 54.1-3408.01 permits a prescribing practitioner's order to be transmitted as an oral prescription, but requires that such transmission be made by either the prescriber or the prescriber's authorized agent. An "authorized agent" is defined as "an employee of the prescriber who is under his/her immediate and personal supervision, or if not an employee, an individual who hold a valid license allowing the administration or dispensing of drugs and who is specifically directed by the prescriber." This activity shall be documented in the patient's medical record.

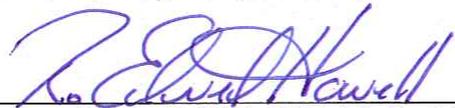
Authorized individuals who can be directed by the prescribing practitioner to transmit a verbal prescription to an outpatient pharmacy are:

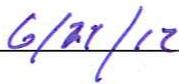
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- a. Registered Nurse or Licensed Practical Nurse
- b. Pharmacist
- c. Physician Assistant
- d. Nurse Practitioner
- e. Employee of the prescriber who is under the immediate and personal supervision of the prescriber, such as the prescriber's administrative assistant.

SIGNATURE:

  
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Robert S. Gibson, M.D., President Clinical Staff

  
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R. Edward Howell, CEO, UVA Medical Center

  
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DATE:

Medical Center Policy No. 0109 (R)

Approved October 1987

Revised September 1993, October 1996, November 1999, May 2000, October 2000, November 2002,  
September 2005, March 2007, March 2008, September 2009, September 2010, June 2012

Reviewed May 1996

Approved by the Patient Care Committee

Approved by Clinical Staff Executive Committee