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UNIVERSITY OF UTAH HOSPITALS AND CLINICS POCKET GUIDE**Information Technology Services**

Information Technology Services (ITS) provides a number of computer systems to support the operations of University Health Care. Several of these systems are of particular interest for fellows, residents, interns and physicians.

For up-to-date information, visit the GME Website at: <http://medicine.utah.edu/gme>

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General Information

CALL AT ANY TIME, TO REACH A HOSPITAL OPERATOR, DIAL 801-581-2121

- The University campus uses an internal 5-digit speed dialing system. The four exchange prefixes used on the University campus are “581” “585” “587” and “213”. When dialing from an on-campus extension to another on- campus extension, simply dial the last digit of the prefix + the 4-digit extension. For example: To call 581-2401 Dial **1-2401**
- To place a call to an off-campus number, dial “9” plus area code (801) before dialing the regular 7-digit number.
- Long distance calls from a University extension may be made for patient-care or business purposes only. Long distance calls from patient-care areas require the use of a **LONG DISTANCE ACCESS CARD** with a 10-digit long distance access number. Long distance access cards will be provided to all house officers through the GME Office.

The below links provide up to date information and resources. If something is not listed here a quick search on PULSE, U Health’s intranet site may yield additional information. <https://pulse.utah.edu/SitePages/Pulse.aspx>

TELEPHONE DIRECTORY: [HTTP://INTRANET.UUHSC.UTAH.EDU/TELECOM/PHONELIST.HTML](http://intranet.uuhsc.utah.edu/telecom/phonelist.html)

U HEALTH CLINICS AND HOSPITALS: [HTTPS://HEALTHCARE.UTAH.EDU/LOCATIONS/](https://healthcare.utah.edu/locations/)

AFFILIATE PARTNERS: [HTTPS://PULSE.UTAH.EDU/SITE/OND/PAGES/AFFILIATED-PARTNERS.ASPX](https://pulse.utah.edu/site/ond/pages/affiliated-partners.aspx)

SMART WEB PAGING INFORMATION: [HTTP://INTRANET.UUHSC.UTAH.EDU/TELECOM/SMARTWEB.HTML](http://intranet.uuhsc.utah.edu/telecom/smartweb.html)

PAGING SERVICES [HTTP://INTRANET.UUHSC.UTAH.EDU/TELECOM/PAGER.HTML](http://intranet.uuhsc.utah.edu/telecom/pager.html)

ORGAN AND TISSUE DONATION - [HTTPS://PULSE.UTAH.EDU/SITE/OTD/PAGES/HOME.ASPX](https://pulse.utah.edu/site/otd/pages/home.aspx)

REPORTABLE DISEASES: [HTTP://HEALTH.UTAH.GOV/EPI/REPORTING/RPT_DISEASE_LIST.PDF](http://health.utah.gov/epi/reporting/rpt_disease_list.pdf)

ABBREVIATIONS AND ACRONYMS: [HTTPS://PULSE.UTAH.EDU/POLICIES/LISTS/POLICIES/DISPFORM.ASPX?ID=1841](https://pulse.utah.edu/policies/lists/policies/disppform.aspx?id=1841)

PATIENT CARE UNITS:

UNIVERSITY HOSPITAL MAP [HTTPS://HEALTHCARE.UTAH.EDU/LOCATIONS/HOSPITAL/PDFS/HOSPITAL-MAP.PDF](https://healthcare.utah.edu/locations/hospital/pdfs/hospital-map.pdf)

HUNTSMAN CANCER INSTITUTE MAP [HTTPS://HEALTHCARE.UTAH.EDU/HUNTSMANCANCERINSTITUTE/PATIENT-SERVICES/DIRECTIONS-PARKING.PHP](https://healthcare.utah.edu/huntsmancancerinstitute/patient-services/directions-parking.php)

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Risk Management Department

Main Line: 801 581-2031

Email: risk-management@hsc.utah.edu

Smart Web: Risk Management available 24/7 for consultation

Office: 525 E 100 S, Suite 4325

Resident Professional Liability Coverage

Professional liability insurance is managed through a self-insured retention trust fund. Specific policies related to professional liability coverage, rotations, moonlighting are available on Pulse and the GME website.

Certification of Insurance and Malpractice History

Requests must be received in writing either via Email: risk-management@hsc.utah.edu or fax (801) 581-3042. Allow 7-10 days for processing time.

Always Contact Risk Management for:

- Legal notices including Notice of Intent, Notice of Claim, Summons, Complaint or Subpoena
- Unanticipated outcomes or if your patient experiences:
 - Sudden or unexpected death
 - Maternal or fetal death or code, Apgar of <5 at 5 minutes of life
 - Elopement or suicide
 - Paralysis or loss of sensation including loss of eyesight or hearing
 - Surgical events including retained foreign object
 - A fracture, dislocation or subdural hematoma
 - Severe burns of any type
 - Product or device failure

Managing a Death of a patient


- Post Mortem Care policy:
Link: <https://pulse.utah.edu/policies/Lists/Policies/DispForm.aspx?ID=2002>
- Death packet materials on Pulse, including consent for Autopsy, Record of Death form lists conditions for mandatory reporting to the Office of the Medical Examiner (801) 816-3850.

Disclosure of an unanticipated adverse outcome

- Contact Risk Management for assistance
- Refer to Disclosure policy
Link: <https://pulse.utah.edu/policies/Lists/Policies/DispForm.aspx?ID=2012>

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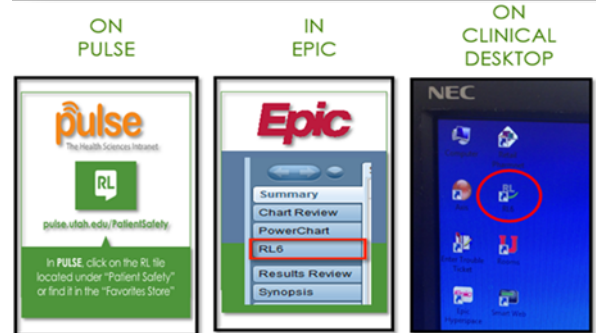
Patient Safety Event Reporting

	<p><u>Guideline: Submitting and Reviewing Event Reports in RL</u> <u>Patient Safety Event Reporting Etiquette</u> <u>Guidance about Sharing Patient Safety Event Information</u> Serious Safety Events defined: <u>List of serious adverse events (formerly known as sentinel events)</u> Safety Event Response process: <u>Event response algorithm (actions to be taken after a patient safety event)</u></p>
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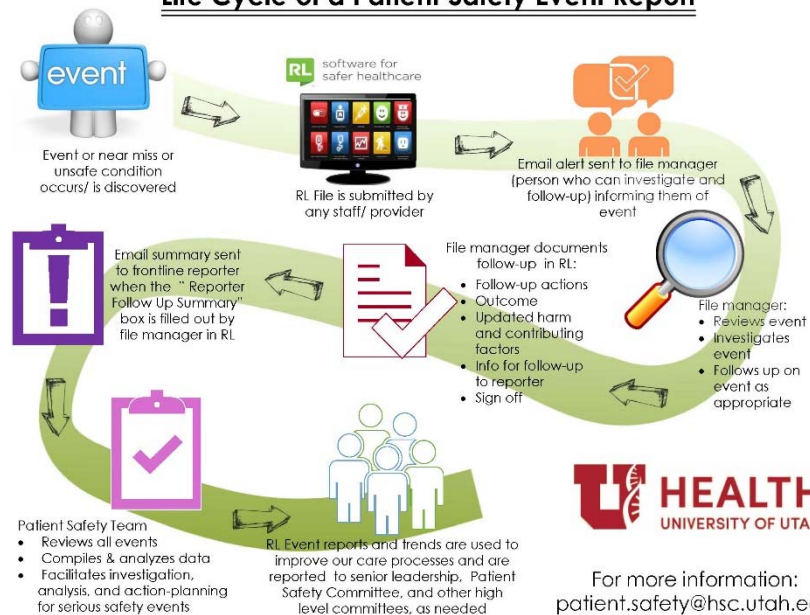
Patient Safety Event Reporting: what to report, what happens when you report and where to report

Anything that harms, or threatens to harm a patient should be reported:

- ✓ Adverse Clinical Events (Serious Safety Events)
- ✓ Near misses /Unsafe conditions
- ✓ Process problems/ System issues
- ✓ Equipment/supply problems
- ✓ Medication errors
- ✓ Communication, coordination, judgment, skill deficits



Life Cycle of a Patient Safety Event Report



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1. Determine if immediate action is needed to minimize or prevent further harm
2. Assess extent of harm
3. Call patient's attending provider and notify them of the event
4. Call your immediate supervisor and notify them of the event, if the event had associated harm
5. Assess immediate need for support for team (social services, pastoral care)
6. Contact Risk Management if permanent harm or death
7. Keep all involved equipment, supplies, medication or devices intact and set aside for investigation
8. Document facts in medical record as appropriate
9. Submit patient safety event in RL (Report and Learn). [Link to RL](#)
10. If research related: Call PI for study

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State and UUHC Reportable Serious Safety Events

 April 1, 2019 FROM <https://rules.utah.gov/publicat/code/r380/r380-200.htm>

UTAH STATE DEPARTMENT OF HEALTH ADVERSE EVENT DEFINITION: AN INJURY ASSOCIATED WITH HEALTHCARE PROCESSES RATHER THAN THE UNDERLYING PATIENT CONDITION OR DISEASE ITSELF AND THAT PROLONGS MEDICAL INTERVENTION OR RESULTS IN HARM, DISABILITY OR DEATH.

ANESTHESIA

ARISING FROM INTRAOPERATIVE OR IMMEDIATELY POST-OPERATIVE DEATH OF A PATIENT WHO THE FACILITY CLASSIFIED PRIOR TO SURGERY AS ANESTHESIA SURGICAL ASSESSMENT CLASS I OR DISCHARGED HOME FROM AN AMBULATORY SURGICAL CENTER. "INTRAOPERATIVE" MEANS LITERALLY DURING SURGERY. "IMMEDIATELY POST-OPERATIVE" MEANS WITHIN 24 HOURS AFTER SURGERY, OR OTHER INVASIVE PROCEDURE WAS COMPLETED, OR AFTER INDUCTION OF ANESTHESIA IF SURGERY NOT COMPLETED;

CARE MANAGEMENT

- ELOPEMENT OR DISAPPEARANCE OF PATIENT FOR MORE THAN 4 HOURS
- INFANT:DISCHARGED TO THE WRONG PERSON
- KERNICTERUS - FAILURE TO IDENTIFY AND TREAT HYPERBILIRUBINEMIA (BILIRUBIN GREATER THAN 25 MILLIGRAMS PER DECILITER)
- PRESSURE ULCERS - STAGE 3 OR 4, ACQUIRED AFTER ADMISSION TO OUR FACILITY EXCEPT FOR PRESSURE ULCERS THAT PROGRESS FROM STAGE 2 TO STAGE 3, IF THE STAGE 2 ULCER WAS DOCUMENTED UPON ADMISSION

CRIMINAL

- IMPERSONATION OF A LICENSED/CERTIFIED HEALTH CARE PROVIDER
- ABDUCTION OF A PATIENT
- NON-CONSENSUAL SEXUAL CONTACT

DEATH/DISABILITY/PERMANENT LOSS OF FUNCTION, ASSOCIATED WITH:

- AIR EMBOLISM, EXCEPT ASSOCIATED WITH NEUROSURGICAL PROCEDURES
- BURN OCCURRING IN OUR FACILITY OR UNEXPECTED FLAME OR SMOKE DURING CARE
- CONTAMINATED DRUGS, DEVICES, OR BIOLOGICS
- CRIMINAL ASSAULT OR BATTERY THAT OCCURS ON OUR PREMISES
- ELECTRIC SHOCK, EXCLUDING EMERGENCY DEFIBRILLATION AND ECT THERAPY
- FALL WHILE BEING CARED FOR IN OUR FACILITY
- FAILURE TO FOLLOW-UP OR COMMUNICATE LABORATORY, PATHOLOGY OR IMAGING RESULTS
- NEWBORN AT GESTATION EQUAL TO OR GREATER THAN 32 WEEKS (EXCLUDING CONGENITAL CAUSES)
- HEALTH CARE ACQUIRED INFECTION
- HYPOLYCEMIA WHICH OCCURRED WHILE IN OUR FACILITY
- INCOMPATIBLE BLOOD/BLOOD PRODUCTS
- INTRA OR WITHIN 24 HOURS POST-OP DEATH OF A PATIENT CLASSIFIED PRE-OP AS ANESTHESIA SURGICAL ASSESSMENT CLASS I (HEALTHY WITH GOOD EXERCISE TOLERANCE; NO ORGANIC PATHOLOGY OR PATHOLOGY IS LOCALIZED AND DOES NOT CAUSE SYSTEMIC DISTURBANCE; EXCLUDES THE VERY YOUNG AND VERY OLD)
- IRRETRIEVABLE LOSS OF AN IRREPLACEABLE BIOLOGICAL SPECIMEN
- LABOR OR DELIVERY
- MEDICATION ERROR
- OFF-LABEL USE OF A DEVICE
- RESTRAINT USE OR BEDRAILS
- SUICIDE WHILE IN THE FACILITY OR WITHIN 72 HOURS OF DISCHARGE
- DELIVERY OF OXYGEN OR OTHER GAS THAT CONTAINS THE WRONG GAS OR IS CONTAMINATED

RADIOLOGICAL

NOTE: RADIOLOGICAL EVENTS ARE MANAGED THROUGH A SEPARATE PROCESS AS PER THE RADIATION SAFETY MANUAL EXAMPLES OF RADIOLOGICAL EVENTS:

- PROLONGED FLUOROSCOPY WITH CUMULATIVE DOSE GREATER THAN 1500 RADS TO A SINGLE FIELD
- RADIOTHERAPY TO THE WRONG BODY REGION
- RADIOTHERAPY GREATER THAN 25% ABOVE THE PRESCRIBED RADIOTHERAPY DOSE
- ARISING FROM A METALLIC OBJECT INTO THE MR

SURGERY OR PROCEDURES REQUIRING CONCENT PERFORMED ON:

- WRONG BODY PART
- WRONG PATIENT
- WRONG PROCEDURE

OTHER SURGERY OR PROCEDURES:

- RETENTION OF A FOREIGN OBJECT AFTER SURGERY OR PROCEDURES REQUIRING CONSENT

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Rapid Response, Code Blue or Medical Emergency Policies/Guidelines

<p style="text-align: center;">University Hospital <u>Guideline: RRT: Rapid Response Team Guideline</u> <u>RN To Provider Chain of command algorithm</u></p>
<p style="text-align: center;">Huntsman Cancer Hospital (HCH) <u>Guideline: RRT at HCH: Rapid Response Team Guidelines</u></p>
<p style="text-align: center;">University Neuropsychiatric Institute (UNI) <u>Guideline: UNI Response to Change in <i>Adult</i> Patient Condition</u> <u>CODE BLUE Medical Emergency at UNI</u></p>
<p style="text-align: center;">University Neuropsychiatric Institute (UNI) <u>Guideline: UNI Response to Change in <i>Pediatric</i> Patient Condition</u> <u>CODE BLUE Medical Emergency at UNI</u></p>
<p style="text-align: center;">University of Utah Orthopedics Center (UUOC) <u>UUOC Rapid Response</u></p>
<p style="text-align: center;">Moran Eye Center <u>Moran Surgery Medical Emergency Response Team</u></p>
<p style="text-align: center;">Cath and Electrophysiology Lab <u>Guideline: Cath Lab/Electrophysiology Emergency Response</u> <u>Policy: Crash/STEMI Carts</u></p>
<p style="text-align: center;">Community Clinics <u>Guideline: Rapid Response- Team – Plan-Community Clinics- Response to patient/non-patient acute changes, illness or injury</u></p>

Updated 5/21/19