I. PURPOSE
The purpose of this policy is to establish standards and related monitoring, notification, and enforcement processes to assure prompt completion of medical records.

II. SCOPE
This policy applies to all medical staff, residents, and others authorized to complete medical records for patients of Indiana University Health North Hospital, Inc. (IU North).

III. EXCEPTIONS
Any exceptions to this policy require the approval of the IU North Hospital Medical Executive Committee (MEC).

IV. DEFINITIONS
Admitting Physician: the physician who determines the need for admission to the hospital and who contacts the hospital to make admitting arrangements; The admitting physician will be considered the attending physician unless the hospital Admitting Department or Patient Placement Services is notified of an official transfer through a documented physician order. For the purposes of this policy, an oral surgeon may be the admitting physician.

Allied Health Practitioner: an individual properly qualified by advanced education and/or clinical training to participate directly in the management of patients, credentialed and privileges as such through the Medical Staff process

Allocation Date: the date when dictation is assigned for completion or a report is ready for signature.

Attending Physician: the physician who coordinates the care during the hospital stay, same as admitting physician unless changed by documented physician order and accepted by the physician receiving the patient. For the purposes of this policy, an oral surgeon may be the attending physician.
**Authentication**: verification of the completeness and accuracy of the written order, not the appropriateness of the order itself.

**Delinquent Medical Record**: a medical record in which reports and signatures are not completed within 15 days following the allocation date.

**Dentist**: a person holding a currently valid and unlimited license to practice dentistry or other similar permit or certificate issued by the Indiana Board of Dental Examiners.

**Hospital**: Indiana University Health North Hospital, Inc.

**Medical Staff**: all physicians and dentists who have been granted recognition as members of the IU Health North Hospital Medical Staff.

**Physician**: a person holding a currently valid and unlimited license to practice medicine or other similar permit or certificate issued by the Medical Licensing Board of Indiana.

**Privileges**: the permission granted to a Medical Staff member to render specific services to patients.

**Text Messaging**: The exchange of brief plain text messages between cellular phones using short message services (SMS). Text messaging may also contain images, videos or sound content.

V. POLICY STATEMENTS

A. Medical records shall be completed at the time of service. Attending physicians will maintain documentation compliant with billing requirements, regulatory and accreditation standards.

B. A complete History and Physical examination shall be available in the medical record within twenty-four (24) hours after admission or prior to a surgery or procedure if performed within the first twenty-four (24) hours.

C. Operative reports shall be dictated within forty-eight (48) hours following surgery. A post-operative progress note must be present in the medical record immediately after surgery to provide pertinent information until the complete operative report is available.

D. Verbal and telephone orders shall be authenticated by the ordering Medical Staff member or AHP with prescriptive authority herein after referenced to as
“practitioner” within forty-eight (48) hours. If the ordering physician is unavailable during that specified timeframe, authentication of verbal orders may be performed by another practitioner within the patient’s treatment team. NOTE: Authentication means verification of the completeness and accuracy of the written order, not the appropriateness of the order itself.

It is not acceptable for physicians or licensed independent practitioners to text orders for patients to the hospital or other healthcare settings. This method provides no ability to verify the identity of the person sending the text, and there is no way to keep the original message as validation of what is entered into the medical record.

E. The Discharge Summary shall be completed upon discharge of the patient from the hospital.

F. The medical record will be considered delinquent if reports and signatures are not completed within 15 days following the allocation date.

G. Dictation responsibilities may be delegated to residents or allied health practitioners, but completion of the medical record is ultimately the responsibility of the surgeon (for operative reports) and the attending physician. House Staff will be expected to complete all medical records upon completion of each rotation.

H. Reports dictated and transcribed through Health Information Management require attending physician and/or surgeon authentication by using SoftMed’s Electronic Signature Authentication – ESA application.

I. Physicians with delinquent medical records will have operating room and admitting privileges suspended until delinquent medical records are completed (as described in PROCEDURES).

J. Health Information Management staff will close out medical records which are left incomplete when the responsible physician is no longer practicing at IU Health facilities or is unable to complete records due to long-term illness or leave of absence.

VI. PROCEDURES

A. Health Information Management will notify physicians of incomplete medical records weekly.
B. Physicians with records which are incomplete at least fifteen (15) days following the allocation date will have the Suspension Warning letter e-mailed to their offices on Monday.

C. If delinquent medical records are not completed by noon on Tuesday of the following week, Health Information Management will e-mail and send a certified Suspension Letter notifying the physician of the impending suspension.

D. A list of physicians with records which remain delinquent at 9:00 a.m. on Wednesday will be e-mailed to the following offices:
   1. Medical Staff Office
   2. Patient Access Services
   3. O.R. Scheduling
   4. Clinical Service Section Chairs
   5. Health Information Management

E. SUSPENSION PROCESS:
   1. Suspensions of scheduling privileges will be effective upon distribution of the final list on Wednesday morning.
   2. Suspension of Operating Room privileges will be managed as follows until delinquent medical records are completed:
      a. Previously scheduled cases may be completed for the first 72 hours of the suspension;
      b. No new cases (elective or emergent) may be scheduled;
      c. Cases may NOT be scheduled with another physician in the group with the intent of assuming primary responsibility after the completion of delinquent records.
   3. Suspension of Admitting privileges will be managed as follows until delinquent medical records are completed:
      a. Physicians may continue to care for patients who are admitted under their care prior to the effective date of this suspension; the suspension penalty refers to scheduling and admitting of additional patients.
      b. No new admissions or observation may be scheduled.
      c. The suspended practitioner is responsible for obtaining call coverage during his/her suspension.
      d. If services of a specific physician delinquent in completion of medical records are needed for urgent/emergent patient care, the circumstances regarding the delinquent records will be referred to the President or an officer of the Medical Staff for review and action.
   4. Privileges will be reinstated after Health Information Management confirms all delinquent medical records are completed. Updates to the suspension list of delinquent physicians will be communicated to:
      a. Medical Staff Office
b. Patient Access Services

c. O.R. Scheduling

5. The Physician is responsible to notify Health Information Management if they are going to be out of town. If a physician becomes eligible for suspension while they are out of town, the suspension will be delayed until the week after the physician returns unless medical records have been completed.

6. Any errors in the tracking of delinquencies should be resolved with the Health Information Management staff.

F. **REPEATED SUSPENSIONS:**

1. Repeated suspensions for delinquent medical records are considered to be disruptive to the hospital operation and reflect a lack of compliance with medical staff policies and the responsibilities of Medical Staff membership.

2. Physicians with three (3) consecutive suspensions in a quarter will receive a letter from the President of the Medical Staff noting the failure to comply with medical record requirements and a mandatory appearance at the next Medical Executive Committee to explain the disregard will be required.

3. Repeated suspensions for delinquent medical records will be considered during the re-credentialing process.

VII. **CROSS REFERENCES**

IU Health North Hospital Medical Staff Bylaws
IU Health North Hospital Medical Staff Rules and Regulations

VIII. **EVIDENCE BASE/REFERENCES**

The Joint Commission
Indiana State Department of Health Hospital Licensure Rules

IX. **RESPONSIBILITY**

Medical Staff
Health Information Management
Board of Managers

X. **APPROVAL BODY**

Medical Staff
Board of Managers
XI. APPROVAL SIGNATURES

Jack K. Keene, MD  
Chair Executive Committee  
President, IU North Medical Staff

Jonathan R. Goble, MHA, MBA, FACHE  
President and Chief Executive Officer

Paul M. Calkins, MD  
Interim Chief Medical Officer