



## CLINICAL POLICY

### Standing Orders

**A. EFFECTIVE DATE :**

March 6, 2020

**B. PURPOSE :**

To establish guidelines for the use of Standing Orders that may be initiated prior to the patient encounter to gather information to facilitate the patient visit.

**C. POLICY :**

1. All direct patient care staff in the Ambulatory Medical Office Practices (RNs, LPNs, MAs, Cardiology Technicians, Ophthalmology Technicians, Radiology Technicians, Mammography Clerks and Certified Diabetic Educators) may initiate approved standing orders within that discipline's scope of practice.
2. Assessments are conducted by RNs and Practitioners only.
3. MAs and Technicians are limited to performing tasks and data collection.
4. Mammography Clerks are limited to activating standing orders for Self-Referred and Self –Requested Screening Mammography

**D. SCOPE :**

UMG Medical Office Practices and the John Dempsey Hospital Medical Practices which include Cardiology, the Cancer Center, Dermatology, Nephrology, Pulmonology, Radiology and Urgent Care.

**E. DEFINITIONS :**

None

**F. MATERIAL(S) NEEDED :**

None

**G. PROCEDURE :**

See approved Standing Orders for procedural steps related to the individual orders which were developed by Clinical Experts and approved by both Clinical Council and the Medical Board

**H. ATTACHMENTS :**

None

**I. REFERENCES :**

1. Connecticut Nurse Practice Act – CT General Statutes Chapter 378, sections 20-87a
2. CT Board of Examiners for Nursing – Declaratory Ruling on Delegation to Unlicensed Assistive Personnel

**J. SEARCH WORDS :**

Standing Orders, Scope of Practice

**K. ENFORCEMENT:**

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

**L. STAKEHOLDER APPROVALS :**

- |   |                          |
|---|--------------------------|
| 1. <u>Anne D. Horbatuck, RN, BSN, MBA (Signed)</u><br><b>Anne D. Horbatuck, VP, Ambulatory Operations</b> | <u>2/7/2020</u><br>Date  |
| 2. <u>Scott Allen, MD (Signed)</u><br><b>Scott Allen, MD Chief Medical Officer</b>                        | <u>2/10/2020</u><br>Date |
| 3. <u>Caryl Ryan, MS, RN (Signed)</u><br><b>Caryl Rayan, Chief Nursing Officer</b>                        | <u>2/21/2020</u><br>Date |

**M. COMMITTEE APPROVALS :**

None

**N. FINAL APPROVAL :**

- |  |                          |
|--|--------------------------|
| 1. <u>Andrew Agwunobi, MD, MBA (Signed)</u><br>Andrew Agwunobi, MD<br><b>UConn Health Chief Executive Officer</b>                  | <u>3/6/2020</u><br>Date  |
| 2. <u>Anne D. Horbtauck, RN, BSN, MBA (Signed)</u><br>Anne D. Horbatuck, RN, BSN, MBA<br><b>Clinical Policy Committee Co-Chair</b> | <u>2/25/2020</u><br>Date |
| 3. <u>Scott Allen, MD (Signed)</u><br>Scott Allen, MD<br><b>Clinical Policy Committee Co-Chair</b>                                 | <u>2/25/2020</u><br>Date |
| 4. <u>Caryl Ryan, MS, RN (Signed)</u><br>Caryl Ryan, MS, RN<br><b>VP Quality and Patient Service &amp; Chief Nursing Officer</b>   | <u>2/26/2020</u><br>Date |

**O. REVISION HISTORY :**

**New Policy Approved:** 09/12/2018  
**Revisions:** 12/27/2019, 3/06/2020