

Assessment of Patients (AOP)		
Standard	Standard Text	Title /Policy Number
AOP.1	All patients cared for by the hospital have their health care needs identified through an assessment process that has been defined by the hospital.	NS/GEN/058 Assessment of patient CSS/ONCO/084 Management of patient on radiotherapy NS/ENDO/006 Care of patient at endoscopy NS/DAYCARE/002 Daycare and Ward 2A management plan NS/WCC/001 Management of inpatient and outpatient in wound care clinic CSS/Ph/020 Patient's Own Medication (POM) and Self administration NS/Renal Dialysis/005 CSS/DIA+CATH/006 Management Plan of Non-invasive and invasive Diagnostic and Interventional Cardiac Services NS/Renal Dialysis/005 Intake of Chronic Dialysis Patient CSS/DIA+CATH/006 Management Plan of Non- invasive and invasive Diagnostic and Interventional Cardiac Services CSS/IM/001 Receiving and Registration of Patients CSS/DC/001 Management of Diabetes Education/Counseling CSS/PHY/002 Physiotherapy Services
AOP.1.1	Each patient's initial assessment includes an evaluation of physical, psychological, social, and economic factors, including a physical examination and health history.	NS/GEN/058 Assessment of patient NS/GEN/027 Pressure Sore Protocol
AOP.1.2	The patient's medical and nursing needs are identified from the initial assessments, which are completed and documented in the clinical record within the first 24 hours after admission as an inpatient or earlier as indicated by the patient's condition.	NS/GEN/058 Assessment of patient I NS/GEN/013 Reduce the risk of patient harm resulting from fall NS/GEN/051 Pain assessment and management NS/GEN/054 Funtional and nutritional assessment NS/GEN/044 Uniform Care of Patients
AOP.1.2.1	The initial medical and nursing assessments of emergency patients are based on their needs and conditions.	NS/A&E/001 Admission Through A&E NS/GEN/058 Assessment of patient NS/A&E/006 Assessment of premature Labour NS/A&E/008 Triage

AOP.1.6	The hospital conducts individualized initial assessments for special populations cared for by the hospital.	NS/GEN/058 Assessment of patient NS/A&E/013 Child Abuse NS/A&E/011 Elderly Abuse NS/A&E/012 Treatment of acutely Disturbed Psychiatric/Suicidal/Violence patient NS/GEN/024 Management of High Risk Patients NS/NUR/NICU/001 Admission Protocol for Newborn NS/ICU/CCU/001 Admission and Discharge Criteria in ICU / CCU
AOP.2	All patients are reassessed at intervals based on their condition and treatment to determine their response to treatment and to plan for continued treatment or discharge.	NS/GEN/058 Assessment of patient CSS/ONCO/024 Management of Patients on Radiotherapy MD/MA/014 Sedation Policy NS/OT/023 Management of Patient for Anaesthesia
AOP.3	Qualified individuals conduct the assessments and reassessments.	NS/GEN/058 Assessment of patient (Plan) Staff Qualification and Education plan (HRPD). NS/GEN/062 Patient Classification and Nurse Staffing System
AOP.5.1	A qualified individual(s) is responsible for managing the clinical laboratory service or pathology service.	CSS.LAB.GL.004.v08 Laboratory Quality Manual (4.0 Management Requirement Pg 7)
AOP.5.3	A laboratory safety program is in place, followed, and documented, and compliance with the facility management and infection control programs is maintained.	CSS.LAB.GL.025.v03 Environmental Safety and Health (ESH) Manual
AOP.5.3.1	The laboratory uses a coordinated process to reduce the risks of infection as a result of exposure to biohazardous materials and waste.	CSS.LAB.GL.025.v03 Environmental Safety and Health (ESH) Manual
AOP.5.4	Laboratory results are available in a timely way as defined by the hospital.	CSS.LAB.GL.005.v04 Management of Laboratory result
AOP.5.5	All equipment and medical technology used for laboratory testing is regularly inspected, maintained, and calibrated, and appropriate records are maintained for these activities.	CSS.LAB.GL.004.v08 Laboratory Quality Manual (5.3 Laboratory Equipment, Reagents and Consumables Pg 29)
AOP.5.6	Essential reagents and other supplies are regularly available and evaluated to ensure accuracy and precision of results.	CSS.LAB.GL.004.v08 Laboratory Quality Manual (5.3 Laboratory Equipment, Reagents and Consumables Pg 29)
AOP.5.7	Procedures for collecting, identifying, handling, safely transporting, and disposing of specimens are established and implemented.	CSS/LAB/GL/007.v07 Handling of Test Request and Laboratory Specimen

AOP.5.9	Quality control procedures for laboratory services are in place, followed, and documented.	CSS.LAB.GL.008.v02 Quality Policy
AOP.5.9.1	There is a process for proficiency testing of laboratory services.	CSS.LAB.GL.008.v02 Quality Policy
AOP.6.1	A qualified individual(s) is responsible for managing the radiology and diagnostic imaging services.	CSS/IM/016 - Management of Diagnostic Imaging & Interventional Services Plan
AOP.6.3	A radiation safety program is in place, followed, and documented, and compliance with the facility management and infection control programs is maintained.	CSS/IM/005 - Radiation Safety CSS/IM/017 - Radiology Department Infection Control
AOP.6.4	Radiology and diagnostic imaging study results are available in a timely way as defined by the hospital.	CSS/IM/013 - Radiological Reporting
AOP.6.5	All equipment and medical technology used to conduct radiology and diagnostic imaging studies is regularly inspected, maintained, and calibrated, and appropriate records are maintained for these activities.	CE/FM/003 - Planned Preventive Maintenance / Calibration Procedure (Plan) Medical Equipment Plan (Biomedical Engineering (FMS)) (SOP NO Pending Christine Chan) Plan Preventive Mainatenance and Class H QC Test
AOP.6.7	Quality control procedures are in place, followed, and documented.	CSS/IM/006 - Quality Assurance