

# REGISTRATION OF PATIENTS ON PATIENT MANAGEMENT SYSTEM - CHW PROCEDURE®

## DOCUMENT SUMMARY/KEY POINTS

- The NSW Health Data Dictionary outline all essential data elements required for collection of patient information.
- This procedure has been adapted for use by The Children's Hospital at Westmead (CHW) staff.
- This procedure is used to educate CHW administrative staff on how to register a patient in the Cerner Patient Management System.
- The Health Information Unit (HIU) are notified of any potential duplicate registrations on a daily basis and any trends are investigated with individual Departments.

### **Important Information:**

- *Each time* a patient presents at CHW their details **must be checked**. This is to ensure that:
  - they are the same patient (if they have previously presented)
  - their details and status are **updated** with every visit.

<b>Approved by:</b>	Director, Clinical Governance	
<b>Date Effective:</b>	1 <sup>st</sup> April 2017	<b>Review Period:</b> 3 years
<b>Team Leader:</b>	Manager	<b>Area/Dept:</b> CHW Medical Records

## CHANGE SUMMARY

- Addition of sections 9 – 13.
- Other amendments have been made throughout Sections 1 – 8.
- Recommend staff re-read the document in its entirety.

## READ ACKNOWLEDGEMENT

- All staff who register patients onto the Patient Management System (PMS) should read and acknowledge this policy.

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## 1 Who should be registered ?

Refer to the NSW Health Client Registration Policy for  
[http://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2007\\_094.pdf](http://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2007_094.pdf)  
Mandatory Registrations

## 2 Registering a Patient in Cerner Patient Management

### Important Information:

- *Each time* a patient presents at The Children's Hospital at Westmead (CHW):
  - The Medicare card **MUST** be presented.
  - Patient details **must be checked** to validate that they are the same patient (if they have previously presented)
  - Patient details should be **updated** as required with every visit.

## 3 Family name

**Definition:** The person's surname or family name by which the family group is identified, as distinguished from his /her given names.

- Family name should be recorded in the format as found on the Medicare Card, in CAPITAL LETTERS.

### Handy Hint:

**If the family name on the Medicare card differs to what is registered on the Patient Management system, then the name on Patient Management MUST be updated to be consistent with the name on the Medicare card. If parents request that the name on the Medicare card needs to be updated, then they must rectify this with Medicare prior to Patient Management being updated.**

- If they have a preferred family name then that name should be entered in the "Preferred Family Name" field. Please do not enter any alternate names in brackets in the family name field.
- The Medicare card has a section for the middle initial, patients need to be asked for the ENTIRE middle name and this will also need to be entered into Patient Management.

### 3.1 Persons with only one name

If the person has only one name, enter that name in the Family Name field and "NoGivenName" in the Given Name field.

### 3.2 Registering an unidentified person

If the identity of the person is unable to be established, enter the Family name as "Unknown". A fictitious Given name should **not** be created. Follow-up to determine the identity of the

person should occur as soon as practicable. If, and when, the person's name becomes known at a later stage, update or complete the change of details form

[http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf)

The name "Unknown" will appear in the 'Previous name' field in Patient Management.

### 3.3 Anonymous persons

It is not recommended that clients remain anonymous in an information system. If, despite counselling, a person continues to wish their true identity be unknown, record the Family name as "Unknown" (In accordance with Health Records and Information Privacy Act (HPP13))

Circumstances where remaining anonymous may be impracticable:-

- A service may require follow up
- Care provided involves a multi-disciplinary team
- Anonymity would deny a clinician information critical to providing safe and appropriate care
- Create an increase in health service liability
- If a parent or guardian wishes that their child's identity be protected for personal reasons they must produce an official document to prove why they must have their child's name restricted. Nursing and clinical staff may also ask for a patient's identity to be restricted. A Patient Alert needs to be added into Patient Management.

Follow-up to determine the identity of the person should occur as soon as practicable, however, **MUST BE DONE PRIOR TO DISCHARGE.**

### 3.4 Punctuated Family names

If special characters form part of the name they should be included, e.g. O'BRIEN do not leave a space before or after an apostrophe or a hyphen. There is a rule in Patient Management that converts the name to all upper case characters.

### 3.5 Hyphenated Family names

The full hyphenated name should be recorded as the Family name. Hyphenated names should be entered with the hyphen and no spaces *before* or *after* the hyphen, e.g. Parker-Bowles not Parker – Bowles.

### 3.6 Multiple words in Family name

Where a person has multiple words in their Family name, record them all. Separate the names with a space, e.g. EL HADDAD, VAN DER LINDEN.

### 3.7 Misspelled Family name

If the person's Family name has been misspelled in error, update the Family Name with the correct spelling via the Modify Person Details conversation or if a current inpatient/Outpatient

via the modify encounter conversation. The misspelled "Family Name" will automatically record in the "Previous Family Name" field in PM.

### 3.8 Confirmation of Family name

Confirmation should be sought where it is unclear which name is the Family name. The Medicare card **MUST** be used to identify the Family name.

#### Change of name

If a parent requests a complete change in name i.e. from John Hunter to Jonathan Hunter, or Adam Hunter, then a "Change to patient details" form **MUST** be completed along with supporting evidence of the change of name prior to any name change occurring [http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf)

The Medicare card and birth certificate **MUST** be sighted and copied.

## 4 Given Name

**Definition:** A person's identifying name(s) within the family group or by which the person is uniquely socially identified.

The Given name is to be recorded in the First Name field, and if they have a second name or more this/they should be recorded in the Middle Name field. The Given name should be recorded in the format required for identification purposes, and should have what is on the Medicare card. It is acknowledged that some people use more than one Given name (e.g. formal name, birth name, nickname or shortened name, middle name or tribal name) depending on the circumstances. This can be recorded in the Preferred Name field. **Do not enter any alternate names in brackets.**

### 4.1 Registering an unidentified person

If the identity of the person is unable to be established, enter the Given name as "Unknown". A fictitious Given name should **not** be created. Follow-up to determine the identity of the person should occur as soon as practicable. If, and when, the person's name becomes known at a later stage, update or complete the change of details form:

[http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf)

The name "Unknown" will appear in the 'Previous name' field in Patient Management.

### 4.2 Persons with only one name

If the person has only one name, enter that name in the Family name field, and as the given name field is mandatory in Patient Management, enter 'NoGivenName'.

### 4.3 Persons with multiple given names

- Where a person has multiple Given Names, record them all, for example if their name is: Anne Marie Louise JOHNSTON. If Anne Marie is their first name, then it should be

recorded in the "Given Name" field, Louise in the "Middle Name" field and JOHNSTON in the "family name" field.

- Anne-Marie Louise JOHNSTON, Anne-Marie with a hyphen should be entered as Anne-Marie in the Given Name field, ensuring there are no spaces before or after the hyphen. Louise should be recorded in the "Middle Name" field and JOHNSTON should be recorded in the "Family Name" field.

Where more than one name is captured in one field, separate the names with a space.

#### 4.4 Record complete information

If the person has many Given names and all of them cannot fit in the data field(s), record as many names in full as possible, in preference to recording initials.

#### 4.5 Shortened or alternate first Given name

Record the Medicare name as the default Given name. If the person uses a shortened or alternate version of their Given name, record this in the Preferred Name field. Alternate names should not be placed in brackets.

#### 4.6 Registering unnamed newborn babies

An unnamed newborn baby should be registered as "Baby of mother's first name".

- For example, if the mother's Given name is Fiona, then record "Baby of Fiona" in the Given Name field for the baby and add the full details for Fiona also need to be entered into the Next of Kin (NOK) fields. The family surname as the "Family Name" as described in.
- If the baby is named during the birth admission, the Given Name should be updated at discharge to reflect the new name and recorded as the Legal name. Local procedures should be put in place to seek the baby's name at discharge. The name "Baby of Fiona" will be automatically recorded as the previous first name.
- If a person is found to be registered as "Baby of Fiona" during a subsequent attendance or re-presentation, the name should be updated to reflect their current name. The name "Baby" will be automatically recorded as the previous first name.
- Stillborn babies, where registered, should be named as for other newborn babies. A deceased flag should be used to indicate the baby is deceased.

#### 4.7 Registering unnamed multiple births

An unnamed (newborn) baby from a multiple birth should use their mother's Family name plus a reference to the multiple births.

- For example, twins born to mother Fiona would be registered as "Baby1 of Fiona" in the Given Name field for the first-born baby and "Baby2 of Fiona" for the second born baby. Arabic numbers (1, 2, 3 ...) should be used and not Roman numerals (I, II, III ...). NOK details must be entered into the NOK fields. ,
- In the case of triplets or other multiple births the same logic applies. The Newborn name should be recorded, e.g. "Baby1 of Fiona, and is retained as an Alias. Local



consideration may be indicated regarding the setting of a time limit on maintaining the Newborn name in the client database.

## 4.8 Misspelled Given name

- If the person's Given name has been misspelled in error, update the Given name with the correct spelling and the record of the misspelled Given name will appear as an Alias in the "previous name field".
- It should not be assumed that the name has been misspelled, as there may be an unusual spelling of the name, e.g. Peter spelt Pieter, Lee spelt Ly, and Michael spelt Micheal.
- Recording misspelled names is important for filing documents that may be issued with previous versions of the person's name and also to assist in searching in the event the misspelled name is used again.

### Change of name

If a parent requests a complete change in name i.e. from John Hunter to Jonathan Hunter, or Adam Hunter, then a Change to patient details form MUST be completed along with supporting evidence of the change of name prior to any name change occurring

[http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf) The Medicare card and birth certificate MUST be sighted and copied and sent to HIU for processing.

## 5 Middle Names

- To be entered into the middle name field in Patient Management.
- If a middle initial is sighted on the Medicare card, parents MUST be asked for the entire middle name and this also needs to be entered into Patient Management.

## 6 Date of birth

**Definition:** The day, month and year on which the person was born.

### 6.1 For unknown date of birth

- If the date of birth is unknown an estimated date of birth should be collected.
- Use 01 for day and 01 for month and estimate year of birth according to the person's approximate age.
- Enter "yes" in the Estimated Date of Birth field in Patient Management.
- Follow up must occur prior to discharge for any estimated date of births to ensure accurate information is recorded.

**Updating Date of Birth**

If there is a request to amend a date of birth, and it is an obvious error i.e. one day out then this can be updated without supporting documentation.

If however, the date of birth is changed to another year or month, then a 'Change to Patient details' form must be completed and supporting documentation attached/sighted ([http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf)) These forms are processed by medical records.

## 7 Medicare Number

**Definition:** Personal identifier allocated by the Health Insurance Commission to eligible persons under the Medicare scheme.

- Check Eligibility for Medicare status. Full Medicare number for an individual (i.e. family number plus person number, maximum size 11).
- Enter the expiry date of the card as the last day of the month that the card is due to expire.
- If a child has not been registered on the Medicare card, they will need to be registered with all details and the Medicare card status will be classified as not known/not stated for a period of up to 4 weeks. These will be followed up and if the child represents after that time, without being registered on the Medicare card, then they will be classified as ineligible (policy to be endorsed).
- If the names on the Medicare card differs to what is registered in Patient Management, then the name on Patient Management MUST be updated to the name on the Medicare card. If parents request that the name on the Medicare card needs to be updated, then they must rectify this with Medicare prior to Patient Management being updated.
- If the Medicare flag is set to not known/non stated, then complete the Not Known/Not Stated reason.

Where possible, a Medical Record Number (MRN) **should not** be issued without a Medicare number. There are some instances where a MRN can be issued with a default Medicare number. This is in arrangement and consultation with the Health Information Unit e.g. CPU.

## 8 Sex

**Definition:** The term 'sex' refers to the biological difference between males and females, whilst the term 'gender' refers to the socially expected and perceived dimensions of behaviour associated with males and females (masculinity and femininity). The correct terminology is sex.

- 'Indeterminate' sex category may be used for newborns with ambiguous genitalia, but the sex must be updated prior to discharge (where possible). Where the parents are

uncertain at the time of discharge, sex can be modified at the next presentation or as soon as practicable.

## 8.1 Valid Values

- Male
- Female
- Indeterminate – should only be used for newborns with ambiguous genitalia.

## 9 Additional CHW data elements that require collection at registration

### 9.1 Address

When required to enter an address into Patient Management, the Address Help button precedes all other address fields. The Address Help, or Quick Address System (QAS) allows the system to search for an address from a database, which assists with ensuring data entry is more accurate.

- The QAS is also useful when only partial address details are known, allowing the user to search for the correct address.

For children under the care of Family and Community Services (FaCS formerly DOCS), the address must be entered as the address of the managing Family and Community Services Centre (CSC) that is looking after the child. This involves manually entering the address through the QAS application. Refer to the QAS quickstart for instructions on how to manual edit an address using QAS.

A list of FACS offices is located on the intranet by accessing the following link:

[http://www.community.nsw.gov.au/about\\_us/contact\\_us/community\\_services\\_centres.html](http://www.community.nsw.gov.au/about_us/contact_us/community_services_centres.html)

#### **For example:**

c/o FACS Liverpool  
100 Smith Street  
Liverpool NSW 2170

For further information on using the Quick Address System (QAS) refer to the following quickstart:

[http://elearning.schn.health.nsw.gov.au/documentation/files/clinical\\_applications/patient\\_management/patient\\_management\\_for\\_wards/Entering\\_addresses.pdf](http://elearning.schn.health.nsw.gov.au/documentation/files/clinical_applications/patient_management/patient_management_for_wards/Entering_addresses.pdf)

If you require an update to the address please complete the following Change of Address intranet form

[http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf)The residential address is the address where the child is living. Do not enter a PO Box in this field. The mailing address however, can be different. Appointment letters will be sent to the mailing address only. If additional copies of letters are required i.e.

divorced parents at different mailing addresses both require a copy, these need to be produced manually.

## 9.2 Next of kin details (NOK)

**Definition:** The Patient's Next of Kin is the primary contact who is legally responsible for the patient. The next of kin is most likely to be the patient's mother or father. Patient Management allows entry of two of these relationships: Next of Kin and Next of Kin2.

- As a paediatric teaching hospital, NOK details are required by The Children's Hospital at Westmead as an essential data item.
- NOK details must be collected at registration and confirmed at every presentation the child has to CHW.
- NOK details are added to the Patient Management database. When completing next of kin details, it is important to avoid duplication of information, and therefore search the database to check if the person has been previously entered.
- When searching for a parent or other NOK, if name, address, DOB or Medicare match then then you may select this person and modify any additional details you may have, for example telephone numbers.
- Where parents are separated/divorced it is ideal to have both parents listed as NOK with separate addresses and phone numbers entered (if they have joint custody of the child). It is important to note that letters for appointments will be generated automatically with the mailing address of the child that is registered in Patient Management. For any queries related to entering NOK information, Health Information Unit should be contacted on x52356.

## 9.3 General practitioner details (GP)

**Definition:** A **general practitioner (GP)** who specialises in Family Medicine is a doctor who provides primary care.

- It is important to enter the patient's GP to assist clinical staff in ongoing patient care.

[http://elearning.schn.health.nsw.gov.au/documentation/files/clinical\\_applications/patient\\_management/patient\\_management\\_for\\_wards/Change\\_GP\\_details.pdf](http://elearning.schn.health.nsw.gov.au/documentation/files/clinical_applications/patient_management/patient_management_for_wards/Change_GP_details.pdf)

## 9.4 Phone Numbers

Mobile and/or home number should be collected as MRN registration. If the mobile belongs to the patient (ie Patient is 16 years) then select Patient's Own Detail field to Y.

## 9.5 Email Address

Asking clients if they have an email address is required. If they provide an email address, enter this into the Email field. If the email address belongs to the patient (ie Patient is 16 years) then select Patient's Own Detail field to Y. If the client, declines to provide an email address, then Select this from the Email Opt Out field.

## 10 Additional Registration Information

### 10.1 Baby for adoption

- When registering a newborn baby for adoption use the family surname. Once the child is adopted the Adoption Agency usually informs the medico-legal manager in the Health Information Unit at CHW to change the family surname. Under the Adoption Act it is against the law for the family to know the surname of the birth family except by mutual agreement. **Any reference to the original surname must be deleted in the medical record or on patient labels. The adoptive parents are not informed of the original name.** Please contact Medicolegal Manager on x52356 for further assistance.
- Do not use the word “adoption” in any of the name fields in Patient Management.

### 10.2 Overseas Patients

When registering an overseas patient, please refer to the Overseas Admission policy:

<http://chw.schn.health.nsw.gov.au/o/documents/policies/policies/2007-8062.pdf>

When registering an Overseas Select Overseas from the address category drop down. Then fill in the Country of residence.

For the mailing address, an Australian address is required.

There are specific guidelines that need to be followed. Please also consult with the Patient Administration Manager for further advice.

### 10.3 CAFAT patients

When completing a CAFAT admission, it is important to remember that Residential Address, Mailing Address and NOK Addresses will require different information.

#### **Residential Address**

- Select CAFAT from the address category drop down In the **Street Address** field, enter 'Cafat'. This will automatically populate the following fields:

Street Address: Su 704, 100 William St, Woolloomooloo 2011

Suburb/Town: Overseas

State: Overseas

Postcode: 9990

Country: New Caledonia

#### **Medicare Status**

Select “ineligible”.

#### **Agency**

These are the contact details for the Agency whilst they are staying in Australia e.g. Ronald McDonald house.

## 10.4 Aboriginal and Torres Strait Islander Patients

All parents/carers of children requiring registration should be asked if the child identifies as being of Aboriginal or Torres Strait Islander origin. This should be asked in the following way:

“Is your child an Aboriginal or Torres Strait Islander?”

The information should be documented in the Patient Management system

## 11 Staff Members

Staff Members of CHW should not be allocated a MRN and registered in Patient Management. All staff registrations need to be referred to the OH & S Coordinator. If the staff member requests that they be added into Patient Management as they are in receipt of a request for testing that they wish to have performed at CHW, then they need to be informed that their information will now form part of the hospital main Medical Record – PowerChart.

## 12 Children under the care of Family and Community Services (FaCS - formerly DOCS)

Children who are in out-of-home care (with FaCS) will typically have parental responsibility allocated to someone other than their biological parents. Parental responsibility is typically allocated to the Minister of Community Services (and case managed by their local Community Services Centre - CSC). In some circumstances parental responsibility will be allocated to the family care giver e.g. grandparents, relative carer, or foster parent..

### **Address**

The address must be entered as the address of the managing Family and Community Services Centre (CSC) that is looking after the child. This involves manually entering the address through QAS. Refer to the QAS quickstart for instructions on how to manually add/edit an address using QAS.

### **Mailing Address**

The address needs to be entered in again, as the FACS address, however, foster carers may also require documents to be mailed to them and this will need to be completed manually.

### **Next of Kin (NOK)**

Next of Kin is determined as the person who has parental responsibility (PR). If FaCS have Parental responsibility then the caseworker's details should be entered into the Agency tab and the NOK fields left blank.

- In some circumstances PR may be shared e.g. If one parent/ family member and FaCS have joint PR of the child, Caseworker should be entered in the Agency tab and the NOK as the parent/ family member.

- If FaCS has parental responsibility then parents' names SHOULD be removed from NOK fields and only caseworker details provided in the Agency tab.
- If FaCS has parental responsibility but the child is case managed by a Non-government Organisation (e.g. Barnardos, Life Without Barriers, Anglicare etc,) then the case workers and the Non Government Organisation should both be entered in the Agency Tab.
- Foster parent's (Authorised foster carer, relative carer or kinship carer) details are to be listed in the CARER tab. ( ).

### 13 Shared Custody

The Court order must be sighted and copied and sent to Health Information Unit for scanning. HIU must place this document under Court Order in PowerChart.

NOK 1 - mothers name, residential addresses and phone numbers

NOK 2 – fathers name, residential address and phone numbers

The residential address is the address where the child is living. The mailing address however, can be different. Appointment letters will be sent to the mailing address only. If additional copies of letters are required ie divorced parents at different mailing addresses both require a copy, then these need to be produced manually.

### 14 Registering persons from disaster sites

- The **Patient Management Disaster Conversation** is to be used for all Disasters.
- There are six fields which must be completed to Register/Admit a patient from a disaster.

Fields Collected in the Patient Management Disaster Conversation		
1	MRN	This is the Disaster Number on the file
2	Triage Colour	Green, Red, Yellow – Assigned by Triage Nurse
3	Sex	Default to Indeterminate unless known then enter Male / Female
4	Age Category	A 0 – 6 Months
		B 7 Months – 3 Years
		C 4 Years – 7 Years

	D	8 Years – 21 Years
5	Admission Date	T = Today
6	Triage Time	The time the patient was triaged
	Reason for Admission	This populates with “Disaster Victim” Is required for those patients who walk in and are not part of the disaster
	All other fields	Populated with generic information which later can be updated once the patient has been transferred to a ward or the Disaster is over.

**N.B. Name is not mandatory for a disaster registration.**

- A pre-allocated disaster box number is used and their information maintained on a register.
- If the patient’s name is known then record it but if not then record as “Unknown”. If the patient has an existing MRN, Medical records will combine the records. If it is the patient’s first visit the disaster number will be retained as their MRN.
- If the patient is admitted their details will be updated prior to discharge.

## 15 Further Information

Contact Patient Administration (ext 53944) Health Information Unit (ext 52356) or IT Trainers (ext 50333)

Also refer to:

- The Patient Management e-learning site:  
[http://elearning.schn.health.nsw.gov.au/information\\_technology/clinical\\_applications/patient\\_management/index.php](http://elearning.schn.health.nsw.gov.au/information_technology/clinical_applications/patient_management/index.php)
- NSW Health “Client Registration Policy” (PD2007\_094):  
[http://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2007\\_094.pdf](http://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2007_094.pdf)
- Disaster Quickstart –  
[http://elearning.schn.health.nsw.gov.au/documentation/index.php?id=patient\\_management\\_for\\_wards#patient\\_management\\_for\\_wards](http://elearning.schn.health.nsw.gov.au/documentation/index.php?id=patient_management_for_wards#patient_management_for_wards)
- Amendment of Patient Details intranet form:  
[http://intranet.schn.health.nsw.gov.au/files/scn800.001\\_amendment\\_to\\_patient\\_details\\_km\\_15nov16\\_0.pdf](http://intranet.schn.health.nsw.gov.au/files/scn800.001_amendment_to_patient_details_km_15nov16_0.pdf)
- Adoption policy and procedure: currently under review
- Quick Address Search (QAS) Quick start -  
[http://elearning.schn.health.nsw.gov.au/documentation/files/clinical\\_applications/patient\\_management/patient\\_management\\_for\\_wards/Entering\\_addresses.pdf](http://elearning.schn.health.nsw.gov.au/documentation/files/clinical_applications/patient_management/patient_management_for_wards/Entering_addresses.pdf)



- Out of Home Care (OOHC)  
[http://chw.schn.health.nsw.gov.au/ou/child\\_protection/services/out-of-Home\\_care/index.php](http://chw.schn.health.nsw.gov.au/ou/child_protection/services/out-of-Home_care/index.php)
- Overseas Admission Policy  
<http://chw.schn.health.nsw.gov.au/o/documents/policies/policies/2007-8062.pdf>

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