

	<b>Policy:</b>	<b>Policy for Administration of Pediatric Medical Directives</b>
	<b>Number:</b>	
<b>Approved by: MAC November 2008</b>	<b>Manual:</b>	
<b>Signature:</b>	<b>Section:</b>	<b>Medical Directive Emergency</b>
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**I. Indication:**

Recipient patients includes any paediatric patient  $\leq 15$  years of age presenting to the ED prior to first contact with the attending physician.

Prior to implementation of any directive, a patient assessment is completed in accordance with standards of practice and any applicable hospital policy.

If a child has a therapeutic procedure administered under this directive but leaves before being seen by the attending physician, staff will forward the patient record, including the record of administered procedures to the attending physician for disposition.

**II. Authorized Implementers:**

All ED nurses and designated staff who have successfully completed the relevant ED Medical Directive orientation.

**III. Consent:**

Staff implementing the directive will obtain consent in accordance with the Health Care Consent Act and any relevant hospital policies and procedures.

**IV. Guidelines for Implementing the Order/Procedure:**

- See following

**V. Documentation & Communication:**

Implementing staff document the:

- Specific therapeutic procedures in the order section of the patient record, noting the medical directive name and number, signing off the order as per the attending physician where known.
- Indications for implementation and patient response in accordance with hospital recordkeeping policies.
- Nurse to ensure that patient has been identified properly and has armband applied.

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