



STATUTORY MINOR CORRECTION

PH 23-2023

CHAPTER 333

OREGON HEALTH AUTHORITY

PUBLIC HEALTH DIVISION

FILED

04/18/2023 3:11 PM
ARCHIVES DIVISION
SECRETARY OF STATE
& LEGISLATIVE COUNSEL

FILING CAPTION: Statutory Minor Correction - OAR 333-076-0940, correcting rule reference

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Public Health Division

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AGENCY ATTESTS THE FOLLOWING CHANGES HAVE BEEN MADE, ACCORDING TO ORS 183.335(7):

Correcting statutory or rule references

AMEND: 333-076-0940

RULE TITLE: ESC Admission Criteria, Patient Care and Discharge

RULE SUMMARY: Correcting rule reference in section (11) due to renumbering of Health Care Interpreter program rules from chapter 333, division 002 to chapter 950, division 050.

RULE TEXT:

(1) A patient may only be admitted to an ESC if the patient:

- (a) Was discharged from the affiliated ASC where the procedure was performed in accordance with these rules;
- (b) Will require a stay of not more than 48 hours from the time the patient was admitted to the affiliated ASC;
- (c) Falls within the American Society of Anesthesiologists, Physical Status Classification System: ASA I or ASA II, or ASA III with only mild to moderate systematic disease but medically stable; and
- (d) Is physiologically stable at the time of admission and has experienced no intraoperative or postoperative complications that would cause the patient to be ineligible for admission based on these rules.

(2) After admission to the ESC, if a patient is no longer physiologically stable, the patient shall be transferred to a local hospital.

(3) A patient is not eligible for admission to an ESC if the patient requires:

- (a) Intensive care services, coronary care services or critical services;
- (b) Administration of blood;
- (c) Continuous monitoring due to instability of vital signs;
- (d) Continuous IV pain medications; or
- (e) Has an active or acute infectious condition.

(4) The following must be entered into a patient's ESC medical record at the time of admission:

- (a) A current medical history and physical examination performed or approved by a member of the ESC medical staff;
- (b) Patient diagnosis;
- (c) A discharge summary from the affiliated ASC including the surgical procedure performed, type of anesthesia used, medications given, recovery events and any other pertinent information regarding the patient's status;
- (d) Physician orders;

- (e) Documentation concerning advance directives; and
- (f) Any other underlying medical condition that could be relevant to the patient's care.
- (5) A patient may only be admitted to an ESC by a physician who has clinical privileges at the ESC.
- (6) Each patient shall be observed for post-operative complications under the direct supervision of a licensed registered nurse. Patients shall be observed for post-procedure complications until their conditions are stable.
- (7) No medications or treatments shall be given without the order of a physician or other individual authorized to give such an order within the scope of their license.
- (8) A physician must evaluate each patient for discharge from the ESC and must sign a discharge order.
- (9) Each patient shall be given written instructions upon discharge covering signs and symptoms of complications as well as any necessary follow-up instructions for routine or emergency care.
- (10) A patient must be discharged from the ESC within 48 hours from the time of admission to the affiliated ASC.
- (11) A patient who prefers to communicate in a language other than English shall be provided health care interpreter services in accordance with ORS 413.559 and OAR 950-050-0160.

STATUTORY/OTHER AUTHORITY: ORS 441.025, 441.026

STATUTES/OTHER IMPLEMENTED: ORS 441.025, 441.026, ORS 413.559, 413.561