


Name of Policy: <u>Patients with special needs</u> Policy Number: 3364-171-04-06 Department: Sleep Disorders Approving Officer: Senior Hospital Administrator Responsible Agent: Director, Sleep Disorders Scope: The University of Toledo Medical Center Pulmonary Services Department	 Effective Date: 03/17/2023 Initial Effective Date: 03/17/2023
<input checked="" type="checkbox"/> New policy proposal <input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

All qualified and trained Sleep Technologists are responsible for accommodating patients who have special needs.

(B) Purpose of Policy

UTMC Sleep Disorders Center will provide as needed, accommodations for patients with special needs as required in relation to communication, ambulation, and personal care. The purpose of this policy is to direct staff to resources for special situations.

(C) Procedure

1. Patients unable to take medication without assistance, needing psychological support, or needing assistance in the bathroom for personal hygiene will be identified and a caregiver arranged. If the patient is a resident of an Extended Care Facility (ECF) the ECF/caregiver packet will be completed and returned prior to the patient arriving. The caregiver can be a family member, or staff member from the facility where the patient currently resides and must be able to complete the tasks needed. In the event a patient arrives in the Sleep Disorders Center and found to need this assistance, the House Supervisor will be contacted 383-5003 and assistance requested. If the assistance will be more than a one-time occurrence, the patient will be rescheduled for a time when a caregiver can accompany the patient.
2. Patients requiring assistance ambulating, standing or transferring will be assisted using safe patient handling equipment such as gate belt, Sara Steady, Hoyer lift. Staff will be able to identify the appropriate piece of equipment for the situation, nearest storage location and be familiar with the use of this equipment.
3. Patients with communication barriers (hearing or sight impaired, foreign language) will be provided with the appropriate assistance. In the event a patient speaks a foreign language, call the House Supervisor at 383-5003 and request a Stratus device. See Accommodations for Patients Who Have a Sensory Impairment and/or Who Have Limited English Proficiency policy # 3364-100-50-06
4. Patients who arrive using a medical device (Life Vest, insulin pump, event monitor) or who are performing a medical procedure (peritoneal dialysis, self-urinary catheterization) will continue these activities as at home. Electrode and sensor placement may need to be modified as needed. This will be noted in the patient’s study. In the event of a medical device failure, the Rapid Response Team or Code Blue team will be called.
5. Patients arriving with deep brain stimulators or pain modulator will continue with the device operating as normal. In the event the study is initiated and artifact from the device is hindering determination of normal sleep/wake morphology, the ordering provider will be contacted for direction. If the provider determines the device should be turned off for any length of time. This should be thoroughly documented. If the patient is agreeable to the physician’s order, then the patient will be responsible for turning the device on and off.

Approved by:	Review/Revision Date: 03/23
<u>/s/</u> Michael Taylor Director, Pulmonary Services	<u>03/20/2023</u> Date
<u>/s/</u> Andre Aguilon, M.D. Medical Director	<u>03/19/2023</u> Date
<u>/s/</u> Russell Smith Senior Hospital Administrator	<u>03/20/2023</u> Date
<i>Review/Revision Completed By:</i> <i>Director, Sleep Disorders Center</i>	Next Review Date: 03/26
Policies Superseded by This Policy:	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.