R 325.20403 Admission policies.

...(2) A patient shall only be admitted to a home on the recommendation and referral of a physician licensed to practice in Michigan.

(3) Before but not later than at the time of admission of a patient, an attending physician shall be designated to be responsible for the medical care and supervision of the patient.

R 325.20601 Medical direction of patients.

Rule 601.

(1) The care of a patient admitted to a home shall be under the continuing direction of a physician licensed to practice in Michigan.

(2) The administrator of the home shall be responsible for assuring or promptly arranging for this continuing medical care and direction by a licensed physician.

(3) The name and telephone numbers of the attending licensed physician and the licensed physician to be called in case of emergency when the attending physician is not available shall be posted at each nursing station. The telephone numbers of the attending physician or his or her replacement in case of emergency shall be provided to the patient, guardian, or designated representative on request.

History: 1981 AACS.

R 325.20602 Medical examination of patients.

Rule 602.

(1) Except in the case of a Friday admission, in which case a patient shall be examined by a licensed physician within 72 hours, a patient admitted to a home shall be examined by a licensed physician within 48 hours after admission, unless the patient has been examined by a licensed physician within 5 days before admission and a copy of that examination is available in the home at the time of the patient’s admission.

(2) A written record of the clinical history and physical examination, together with a diagnosis and treatment plan, shall appear in the patient’s clinical record.
(3) The examination shall include a chest x-ray, unless a chest x-ray has been taken within 90 days of admission and a report of the results of that x-ray examination is available in the home at the time of the patient’s admission for inclusion in the patient’s clinical record.

History: 1981 AACS.

R 325.20603 Medical visits to patients.
Rule 603.

(1) A patient in a home shall be seen and, to the extent appropriate, shall be examined by a licensed physician at least once every 60 days, unless justified otherwise and documented by the attending physician in the patient’s clinical record. At a minimum, a patient in a home shall be seen and, to the extent appropriate, shall be examined by the attending physician at least once in each 6-month period, and a record of each physician visit to a patient shall be recorded with pertinent clinical observations in the patient’s clinical record by the physician.

(2) Not later than at the time of admission of a patient, an attending physician shall be designated to be responsible for the medical care and supervision of the patient. This shall not preclude a patient from also receiving health services from another provider of choice, unless medically contraindicated.

History: 1981 AACS; 1983 AACS.

R 325.20604 Treatment of patients.
Rule 604.

(1) Treatment rendered to a patient shall be in accordance with the specific or standing written orders of the attending licensed physician. Standing orders shall be reproduced in the patient’s clinical record and shall be signed by the attending physician within 48 hours.

(2) Telephone or other verbal orders from the physician shall be written on the patient’s clinical record by the licensed nurse in charge and shall be signed by that licensed nurse. Telephone or other verbal orders recorded by the licensed nurse in charge shall be countersigned by the physician within 48 hours.

History: 1981 AACS.

R 325.20605 Physicians’ assistants in homes.
Rule 605.

(1) A physician’s assistant working under the supervision of a licensed approved physician, as set forth in parts 170 and 175 of the code, may carry out appropriate delegated functions
in a home in accordance with written policies of the home formally adopted by the
governing body, owner, or operator.

(2) The written policies governing the functions of the physician's assistant within the home
shall be consistent with law and rules applicable to the home, the physician's assistant, and the supervising
physician.

(3) The physician's assistant shall not substitute for the licensed physician insofar as the
overall responsibility for a patient's care is concerned.

(4) The physician's assistant shall not be or function as an employee of the home and shall
be limited to providing care for the patients of the supervising physician.

(5) The attending physician supervising a physician's assistant shall be required to visit the
patient in a home at intervals prescribed in law and rule; shall check, renew, or amend
physician orders at prescribed intervals; shall review and participate in the development of
patient care plans following admission and at prescribed intervals; and shall review,
approve, and countersign all physician assistant entries in the clinical record. Orders
written in the clinical record by the physician's assistant shall be countersigned by the
attending supervising physician within 48 hours.

History: 1981 AACS; 1983 AACS.

R 325.20606 Applicability.

Rule 606. The provisions of R 325.20601 to R 325.20605 shall apply to all homes, except those subject to the provisions of section 21707(2)(b) of the code.

History: 1981 AACS.

R 325.21203 Medical audits.

Rule 1203.

(1) The home, through its medical director, if applicable, and the participation of 1 or more attending physicians, shall complete at least 1 medical audit annually...