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481—58.14(135C) Medical services.

58.14(1) Each resident in a nursing facility shall designate a licensed physician who may be called when needed. Professional management of a resident's care shall be the responsibility of the hospice program when:

- a. The resident is terminally ill, and
- b. The resident has elected to receive hospice services under the federal Medicare program from a Medicare-certified hospice program, and
- c. The facility and the hospice program have entered into a written agreement under which the hospice program takes full responsibility for the professional management of hospice care.
- **58.14(2)** Each resident admitted to a nursing facility shall have had a physical examination prior to admission. If the resident is admitted directly from a hospital, a copy of the hospital admission physical and discharge summary may be made part of the record in lieu of an additional physical examination. A record of the examination, signed by the physician, shall be a part of the resident's record. (III)
- **58.14(3)** Arrangements shall be made to have a physician available to furnish medical care in case of emergency. (II, III)
 - **58.14(4)** Rescinded, effective 7/14/82.
- **58.14(5)** The person in charge shall immediately notify the physician of any accident, injury, or adverse change in the resident's condition. (I, II, III)
- **58.14(6)** A schedule listing the names and telephone numbers of the physicians shall be posted in each nursing station. (III)
- **58.14(7)** Residents shall be admitted to a nursing facility only on a written order signed by a physician certifying that the individual being admitted requires no greater degree of nursing care than the facility is licensed to provide. (III)
- **58.14(8)** Each resident shall be visited by or shall visit the resident's physician at least twice a year. The year period shall be measured by the date of admission and is not to include preadmission physicals. (III)*

^{*}Emergency, pursuant to Iowa Code section 17A.5(2)"b"(2).