# **SOP: Triage and Assignment to Appropriate**

## **Healthcare Provider**

This SOP details the **triage process and assignment to appropriate healthcare providers**, focusing on the systematic assessment of patient conditions upon arrival, prioritizing care based on severity, and efficiently directing patients to the most suitable medical professionals. The aim is to optimize patient outcomes, improve workflow efficiency, and ensure timely and accurate healthcare delivery.

### 1. Purpose

To provide a standardized procedure for assessing and prioritizing patients, ensuring timely assessment, assignment, and escalation to the appropriate level of healthcare provider based on their clinical needs.

## 2. Scope

This SOP applies to all healthcare staff involved in triage at [Facility Name], including but not limited to triage nurses, emergency medical staff, and reception personnel.

## 3. Responsibilities

- Triage Nurse: Performs initial patient assessment, assigns triage category, and refers patient as appropriate.
- Reception Staff: Registers patients and provides them with initial instructions.
- Healthcare Providers: Receive patients as assigned and proceed with appropriate medical intervention.
- Supervisors/Managers: Ensure adherence to SOP and provide ongoing staff training.

#### 4. Definitions

- Triage: The process of determining the priority of patients' treatments based on the severity of their condition.
- Assignment: Directing the patient to the most suitable healthcare provider for their medical needs.

### 5. Procedure

#### 1. Patient Arrival:

o Patient registers at reception and is provided with a triage form.

#### 2. Initial Assessment:

- Triage nurse performs a quick assessment using the approved triage tool (e.g., ESI, CTAS, or local protocol).
- o Vital signs and chief complaint are recorded.

#### 3. Triage Categorization:

o Patient condition is categorized based on severity (see Table 1 below).

#### 4. Assignment:

• Based on triage category, direct the patient to the appropriate provider (e.g., Emergency Physician for critical, General Practitioner for non-urgent).

#### 5. Documentation:

 All assessments, decisions, and actions taken must be documented in the patient record promptly and accurately.

#### 6. Escalation:

 If patient condition deteriorates, re-assess and upgrade their triage status as required, notifying higher-level providers immediately.

## 6. Triage Categories & Assignment Matrix

Triage Category	Description	Assigned Provider	Target Time to Provider
Category 1: Critical	Life-threatening condition; immediate intervention required	Emergency Physician/Resuscitation Team	Immediate (0 min)
Category 2: Emergent	Serious condition, potential threat to life, limb, or organ	Emergency Physician	≤ 10 min
Category 3: Urgent	Stable, but requires timely intervention	Senior Nurse Practitioner/Physician	≤ 30 min
Category 4: Non- Urgent	Minor illness or injury	General Practitioner/Nurse Practitioner	≤ 60 min
Category 5: Routine	Chronic or non-acute issues	General Practitioner	≤ 120 min

## 7. Monitoring & Quality Assurance

- Regular audits of triage process and assignment accuracy.
- Feedback from staff and patients to identify areas for improvement.
- Continual education sessions for triage and emergency staff.

### 8. References

- [Insert name of triage tool/protocol used, e.g., Emergency Severity Index (ESI)]
- [Relevant national or institutional triage policies]

## 9. Revision and Approval

Effective Date: [Insert Date]
Next Review Date: [Insert Date]
Approved by: [Name & Title]