

Medical Plan of Treatment Procedures

When the delivery of care to a patient in the home is under the direction or supervision of a physician or when a physician is responsible for the medical care of the patient, a medical plan of treatment must be established for each patient receiving care or treatment provided by the licensed nurse in the home or residence.

The licensed nurse providing care to the patient is responsible for having the medical plan of treatment signed by the physician, physician assistant, or advanced registered nurse practitioner, acting within his or her respective scope of practice, within 30 days from the initiation of services and reviewed by the physician, physician assistant, or advanced registered nurse practitioner in consultation with the licensed nurse at least every 2 months.

The licensed nurse responsible for delivering care to the patient is responsible for the medical plan of treatment which shall include, at a minimum, the following:

- (a) Diagnoses;
- (b) Activities permitted when indicated;
- (c) Diet when indicated;
- (d) Medication, treatments, and equipment required; and
- (e) Dated signature of physician, physician assistant, or advanced ed nurse practitioner.

The delivery of care pursuant to a medical plan of treatment must be substantiated by the nursing notes or documentation made by the nurse in compliance with nursing practices established under Chapter 464, F.S.

The initial medical plan of treatment, any amendment to the plan, additional orders or change in orders, and copy of clinical notes must be filed in the office of the nurse registry, pursuant to Section 400.506(15)(b), F.S., within 30 days, pursuant to Section 400.497(7), F.S.

The nurse registry shall inform nurse registrants that the shift nurse that communicates with the physician's office, the physician assistant or the advanced registered practitioner about any changes in the orders should update the plan of treatment.

The patient, caregiver or guardian must be informed by independent contractors of the nurse registry that:

- (a) They have the right to be informed of the medical plan of treatment;
- (b) They have the right to participate in the development of the medical plan of treatment;
- (c) They may have a copy of the medical plan of treatment if requested; and
- (d) The caregiver being referred is an independent contractor of the registry.

Specific Authority 400.497, 400.506 FS. Law Implemented 400.497, 400.506 FS.

History—New 2-9-93, Amended 1-27-94, 12-24-00, 8-10-06.