



Institutional Handbook of Operating Procedures Policy 09.11.04	
Section: Clinical Policies	Responsible Vice President: Senior Vice President, Chief Medical & Clinical Innovation Officer
Subject: Personnel Issues	Responsible Entity: Ambulatory Services

I. Title

Standing Delegation Orders

II. Policy

[Standing Delegation Orders](#) for a specific population shall be approved by the clinical department chair for that service.

All Registered Nurses (RN), Licensed Vocational Nurses (LVN) and/or Medical Assistants (MA) who administer treatment as outlined by the standing delegation order shall be employed or contracted by UTMB and have completed organizational as well as order specific training and passed competency testing as indicated by the UTMB policy.

Use of standing delegation orders will be documented in UTMB’s electronic medical record.

Twelve (12) stipulations are delineated in the Texas State Board of Nursing (BON) Position Statement for Initiating Physician Standing Orders and the standing delegation orders.

In order to carry out a standing order, standing orders must be congruent with the requirements specified by the BON and Texas Medical Board as stated below:

1. Include a written description of the method used in developing and approving them and any revision thereof;
2. Be in writing, dated, and signed by the physician;
3. Specify which acts require a particular level of training or licensure and under what circumstances they are to be performed;
4. State specific requirements which are to be followed by persons acting under same in performing particular functions;
5. Specify any experience, training, and/or education requirements for those persons who shall perform such orders;
6. Establish a method for initial and continuing evaluation of the competence of those authorized to perform same;
7. Provide for a method of maintaining a written record of those persons authorized to perform same;
8. Specify the scope of supervision required for performance of same, for example, immediate supervision of a physician;
9. Set forth any specialized circumstances under which a person performing same is to immediately communicate with the patient’s physician concerning the patient’s condition;
10. State limitations on setting, if any, in which the plan is to be performed;
11. Specify patient record-keeping requirements which shall, at a minimum, provide for accurate and detailed information regarding each patient visit; personnel involved in treatment and evaluation on each visit; drugs, or medications administered, prescribed or provided; and such other information which is routinely noted on patient charts and files by

- physicians in their offices; and
12. Provide for a method of periodic review, which shall be at least annually, of such plan including the effective date of initiation, and the date of termination of the plan after which date the physician shall issue a new plan.

III. Procedures

Development and approval of a standing delegation order:

1. Requests for new standing delegation orders via electronic templates will include: name of medical condition, reason for visit or visit type, procedure, or test covered by the standing delegation order, identification of patient population/set of symptoms when standing order is applicable, required experience, training and or competency for staff administering standing delegated order, parameters for immediate notification of physician, and signature of authorizing physician(s), including department chair, if department specific, or physician executive leadership authorizing use throughout the health system, the chief medical information officer, and chief nursing executive. The standing delegation order will be entered into the EHR immediately by the RN, LVN MA, Tech, or other listed staff roles and designated as a standing delegated order under the authorizing provider's name.
2. During development, and at least annually, best practices, as reflected in nationally recognized evidence-based guidelines, will be reviewed with the authorizing physician to ensure standing delegation order meets current medical practice standards.
3. Standing delegation orders are reviewed and approved by
 - Clinical faculty physicians, medical directors, and/or departmental chairs;
 - Chief Nursing Executive,
 - Chief Medical Information Officer;
 - Professional Practice Council or staff directly impacted by the order;
 - Pharmacists, as assigned, if medications are included in the document.
4. All standing orders must be presented to the Medical Executive Committee for review after signatures are obtained. The Medical Executive Committee may require specific approval for any standing order which the committee determines should have additional oversight. In addition, those orders containing medications will be presented to the Pharmacy & Therapeutics Committee after signatures are obtained.
5. Whenever possible, standing orders are linked from the applicable order or order set or protocol in the EHR for reference.
6. Copies of approved standing delegated orders will be electronically accessible from the UTMB intranet webpage. This copy will display approving physician signature and date of approval.
7. Adverse events associated with the order will be reported in the UTMB incident reporting system.

IV. Relevant Federal and State Statutes

[42 CFR §482.21](#)
[22 Texas Administrative Code §193.2\(19\)](#) 22 Texas Administrative Code §193.4

V. Related UTMB Policies and Procedures

[IHOP - 09.11.05 - Physician Orders](#)
[UTMB Medical Staff Rules and Regulations](#)

VI. Dates Approved or Amended

Originated: 11/12/2013

<i>Reviewed with Changes</i>	<i>Reviewed without Changes</i>
11/05/2024	12/07/2016
	06/21/2023

VII. Contact Information Ambulatory
Operations (409) 266-9906