

**Institutional Handbook of Operating Procedures**  
**Policy 09.11.04**

Section: Clinical Policies	Responsible Vice President: EVP and CEO Health System
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 State Board of Medical Examiners (TSBME) as stated below:

1. Include a written description of the method used in developing and approving them and any revision thereof;
2. Standing delegation orders will 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 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 administrating standing delegated order, parameters for immediate notification of physician and signature of authorizing physician. The standing delegation order will be entered into the EMR immediately by the RN, LVN or MA and a co-signed by the physician within 48 hours.
2. OK will review best practices as reflected in nationally recognized evidence based guidelines 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 director, departmental chairs, Chief Nursing Officer, the Clinical Practice Council, and Medical Staff Executive Committee prior to implementation. In addition, those orders containing medications will also be approved by the P&T committee.
4. Copies of approved standing delegated orders will be electronically stored on the Clinical Content webpage. This copy will display approving physician signature and date of approval.
5. Adverse events associated with the order will be reported in the UTMB incident reporting system.

**IV. Relevant Federal and State Statutes**

[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](#)

**VI. Dates Approved or Amended**

<i>Originated: 11/12/2013</i>	
<i>Reviewed with Changes</i>	<i>Reviewed without Changes</i>
	12/07/2016
	06/21/2023

**VII. Contact Information**

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