



## IRATE PATIENT POLICY AND PROCEDURES

MSRDP Operating Procedure Number: MSRDP 1.009      see: Quality Management 01.003.49  
Effective Date: April 2002  
Prepared By: MSRDP Administration and UNTHSC Quality Management  
Purpose: To provide guidance for dealing with patients that are demonstrating physical or verbal anger or rage.

Approval: \_\_\_\_\_  
Chairman, MSRDP Board of Directors

- 1.0 Policy** Patients that become irate in the clinical areas of UNTHSC shall be afforded the opportunity to calm down and complete the reason for their visit to UNTHSC.
- 2.0 Purpose** To provide guidance for dealing with patients that are demonstrating physical or verbal anger or rage.
- 3.0 Definitions** Irate patient – A patient that is physically or verbally demonstrating anger or rage.
- 4.0 Procedures**
  - 4.1 Refrain** from any behavior that would further escalate the situation.
  - 4.2** Attempt to calm the patient through positive communications techniques, i.e. How may I help you? What can I do to help with correcting the problem? I am unable to make that decision, but I will get someone who can help you.
  - 4.3** If the patient becomes very loud or uses abusive language, attempt to get the patient out of the waiting room, hallway or isolate from other patients.
  - 4.4** The clinic manager or supervisor shall be contacted immediately to assist in dealing with the problem. The clinic manager or supervisor should get as much information about why the patient is angry and then evaluate the situation for resolution.



- 4.5 If the patient continues to be irate and is very disruptive to the clinic's operation, Campus Police should be notified (2600) for intervention and to physically remove the patient from the clinic setting if necessary.
- 4.6 The incident should be documented in the patient's medical record.
- 4.7 If the patient wishes to file a complaint or grievance, advise the patient of the procedure to follow. Call the patient representative if assistance is needed. (QM policies 01.003.15, 01.003.23, 02.003.35).
- 4.8 The patient's behavior may be a determining factor for consideration for disengagement from further UNTHSC care/services.

**5.0 References**

**6.0 Follow-Up and Review** Policy to be reviewed as needed or every three (3) years.

**7.0 Responsibility**

Senior Associate Dean and Chief Medical Officer  
Vice President, Practice Operations and Chief Administrative Officer  
Senior Administrative Official in each Patient Care Department  
Campus Police