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| Use Case Name: | Admission Procedure |
| Use Case Description: | This use case allows the nursing team to schedule and execute the admission of a patient to any department in the hospital. |
| Use Case Authors: | Mounir Touati |
| Actors: | Nurse (primary), receptionist (primary), chief nurse (primary), auxiliary nurse (primary), beneficiary attendant (primary), doctor (secondary) |
| Location: | Inside the hospital department |
| Status: | Initial |
| Priority: | 1 |
| Assumptions: | 1. The patient is consenting to follow medical and or chirurgic procedures. 2. There are no absolute contraindications to the procedure. 3. The patient doesn’t cancel or postpone the given appointment. 4. The patient is scheduled on a waiting list. 5. The department is in normal working conditions (no catastrophic or massive emergencies) |
| Preconditions: | 1. -A convenient bed is free for the patient. 2. —Medical prerequisites are respected. 3. —Various preliminary examinations are made. 4. —If indicated, blood is available for transfusion. |
| Post-conditions: | 1. Each member of the team is able to access the patient data. |
| Primary Pathway  (Happy Path)  (Main Flow) | 1. —Chief-nurse receives the admission request from the doctor. 2. —Chief-nurse identifies with the patient a convenient period for admission. 3. —Chief-nurse inserts check list tasks relatively to the medical procedure. 4. —Chief-nurse confirms effective date of admission. 5. —The Receptionist insert patient’s data on waiting list. 6. —The patient arrives on the appointment date and hour. 7. —Receptionist identifies the patient, updates waiting list and notifies nurse and doctor in charge. 8. —Receptionist transmits doctor’s instructions. 9. —Receptionist collects personal and medical documents to be included in patient’s file and eventually mentions missing ones. 10. —Nurse accompanies the patient to his room and introduces her team. 11. —Beneficiary attendant collects meal choices and identifies patient belongings. 12. —Nurse explains room, bathroom, bed and bell usage. 13. —Auxiliary nurse provides the wristband and collects vital signs. 14. —Nurse begins initial data collection and various evaluations. 15. —Nurse determines assistance and care levels. 16. —Nurse explains monitoring procedures and frequencies. 17. —Nurse explains isolation purposes and procedures. 18. —Nurse provides explanations for preliminary pre- and post-procedures. 19. —Nurse explores ambiguities and provides answers. 20. —Nurse provides various consent forms to be signed. 21. —Auxiliary nurse provides informative flyers and mentions visiting hours. 22. —Nurse provides feedback and instructions. 23. —Doctor performs clinical evaluation and transmits instructions. 24. —Nurse begins preparation for the procedure. |
| Alternative Pathway | **Any step requiring a direct action from the patient can be performed by his legal tutor if he is not able to do it for whatever possible reason.**  A missing document has to be recuperated within 2 hours. |
| Exception Pathway  (Error Pathway) | E1: if one of the preconditions (1, 2, or 3) is not satisfied, the whole procedure is canceled and a new appointment is to be scheduled.  E2: if the bed is not available or the patient postpones the procedure for exceptional reasons, a new appointment is to be scheduled.  E3: after 30 minutes of delay, the receptionist has to contact the patient to confirm his arrival. If unreachable, the whole procedure is canceled and the bed can be provided to emergency cases.  E4: if the patient doesn’t provide donors for blood transfusion, a special request is to be sent to provide the necessary blood units.  E5: The absence of a signature on the consent forms is equal to a refusal. |