

Document ID EM/CHECK/04.1/V2.0 Document Version 02 Document Category Checklist Issue Date 05/2026

Emergency Services Checklist

Sr. No.	Objective Element	Requirements	Yes	No
1	COP.2.a	Is the Emergency Room area accessible with clear signage and directions in an understandable manner, with clearly designated areas?		
2	COP.2.a	Are defibrillators, vital sign monitors, emergency drugs, and oxygen supply available in the Emergency Room?		
3	COP.2.a	Are duty rosters of nurses and Resident Medical Officers available and adequate?		
4	COP.2.b	Is there an SOP for management of Medico-Legal Cases (MLC), including first aid provision and transfer-out policy if beyond scope, with documented MLC records and police intimation forms?		
5	COP.2.c	Is there a documented CPR policy including defined team roles, equipment, medications, protocol, and records of actual and mock CPR events with post-event analysis and CAPA?		
6	COP.2.d	Is there a documented triage policy and are personnel aware of the triage process?		
7	COP.2.e	Is patient reassessment carried out appropriately for change in status with evidence documented in patient files?		
8	COP.2.f	Does patient documentation include discharge/transfer notes mentioning clinical findings, investigations, treatment given, condition at discharge/transfer, and reason for transfer?		
9	COP.2.i	Is there a policy for management of 'Dead on Arrival' or patients who die shortly after arrival, including logbook, resuscitation records, storage of dead body, post-mortem policy, and death certification process?		
10	AAC.2.a / AAC.2.b	Is ER registration carried out with UHID generation, general consent, and adherence to registration policy?		
11	AAC.3.a	Is initial assessment documented using a structured format including vital parameters?		
12	COP.2.i	Is there a documented disaster management plan with defined resources, training, and mock drills conducted at least twice annually?		
13	COP.1.a	Is an ER manual available demonstrating care as per statutory requirements?		
14	COP.1.b	Does the ER manual reference clinical practice guidelines for common diagnoses?		
15	COP.10.a	Is there a policy on pain management and are pain screening records available in ER patient files?		
16	PRE.2.e	Are interpreters or alternative language assistance provisions available in the Emergency area?		
17	FMS.7.a	Are early detection systems and evacuation plans available for emergencies?		
18	FMS.1.a	Are patient safety measures available including bed rails, grab bars, safety belts, alarms, call bells, fire safety devices, and wheelchair accessibility?		
19	MOM.2.d	Is availability of medicines ensured as per the approved list?		
20	PSQ.3.d	Are patient safety goals implemented and monitored in the Emergency Room?		
21	IPC.1.b	Are hand hygiene facilities available in the Emergency area?		
22	IPC.1.f	Are hand hygiene guidelines displayed in the ER and are surveillance records maintained?		
23	IPC.1.b	Is appropriate use of PPE ensured in the Emergency area?		
24	HRM.5	Do ER staff files contain job description, job specification, code of conduct, induction training records, patient care training, safety and quality training, emergency code training, appraisal records, credentialing and privileging records, and vaccination/immunization records?		
25	HRM.2.c	Is staff training aligned with specific job descriptions and competency requirements?		

Disclaimer

The content of the E-mitra is intended to serve as a sample and guide for better understanding the NABH Entry Level Standards. It is not prescribed by NABH as the exclusive or only way to meet the standards. Healthcare organizations are encouraged to adapt and modify the materials according to their own scope of services and operational needs. NABH is not liable for any misinterpretations or errors resulting from the unmodified use of this material, or for any non-compliance during assessments that may arise because of such actions.