


Name of Policy: <u>Patient Appointments and Follow-up Care Determination</u> Policy Number: 3364-101-03-07 Department: Ambulatory Services Approving Officer: Chief Executive Officer Responsible Agent: Chief Operating Officer Scope: Ambulatory Services	 Effective Date: 5/1/2022 Initial Effective Date: 8/24/2005
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

Patient assessment and follow-up care requiring medical assessment will only be determined by Registered Nurses, Physician Assistants, Advanced Practice Nurses or Physicians in Ambulatory Clinics.

(B) Purpose of Policy

To assure appropriate patient care is determined by professionals within the scope of practice.

(C) Procedure

1. Patient appointments will be scheduled as directed by the provider. **If the patient is experiencing chest pain, upper or lower GI bleeding, shortness of breath, a temperature above 104°, loss of consciousness, blurred vision or an unexplained serious adverse event, they should speak with an RN or Provider immediately.**
2. Patient calls that require medical assessment will be transferred to an RN for determination of care urgency.
3. If an RN is not available in clinic, staff will document a patient case into the patient’s medical record, using words and descriptions that the patient uses related to his/her symptoms or complaint. The staff will also include the patient information and task the message, a physician, PA, or Advanced Practice Nurse review, write and sign orders related to the patient case within 24 hours.
4. Any additional information not already available in the medical record should be made available for the provider to review at the time of response to the patient case. If there are any directions that need to take place, the provider will document that in the medical record and reassign it to the appropriate clinic staff for handling. Once the task is completed the patient case shall be closed.
5. Once the note is signed by the provider and patient follow-up is complete, the patient case should then be closed.
6. If a patient calls requesting a new or follow-up appointment, standards should be set by the department’s scheduling protocol along with the providers to determine timing of the appointment.

<p>Approved by:</p>	<p>Review/Revision Date:</p>
<p><u>/s/</u> <u>04/26/2022</u> Christine Stesney-Ridenour, FACHE Chief Operating Officer, UTMC Date</p> <p><u>/s/</u> <u>04/28/2022</u> Richard Swaine, CPA Chief Executive Officer, UTMC Date</p> <p><i>Review/Revision Completed By: Ambulatory Services</i></p>	<p>1/2007 11/17/2009 10/12 5/13 5/1/2016 5/1/2019 5/1/2022</p>
<p>Next Review Date: 5/1/2025</p>	
<p>Policies Superseded by This Policy: 3-07</p>	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.