



Rancho Los Amigos National Rehabilitation Center

ADMINISTRATIVE POLICY AND PROCEDURE

SUBJECT: INPATIENT CONSULTATION POLICY

Policy No.: B858
Supersedes: April 8, 2019
Reviewed: February 15, 2023
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PURPOSE:

To ensure consultations are received and referring providers get a prompt response back and to establish the responsibilities of providers requesting consultations as well as the provider being consulted.

DEFINITION:

A consultation is advice provided to a RLANRC inpatient by a provider at the request of another provider, regarding the evaluation or management of a specific problem.

PROCESS:

1. Request for Consultation

Consultation should be requested when a medical problem is present or arise that is beyond the area of expertise of the attending provider or if a special procedure is needed for which the attending provider is not privileged.

Consultation must be requested by entering an order in the patient's electronic medical record. The order must include the specialty of which the consultation is requested, detailed reason for consultation, and the priority of the request (routine, stat, or urgent)

2. A request for an inpatient consultation may come from any medical staff, including residents and fellows, but the request must be approved in advance by the attending provider.

3. Communication of Consultation Request

The consultation request will be entered into the patient's electronic medical record by the requesting provider..

The consultation request notification will be printed automatically in the area designated for the consulting provider, such as the Medical Department Office.

Designated staff will communicate with the consulting provider about all requests and will log them into electronic medical record as appropriate.

4. Timeliness of Consultation

All routine consultations received prior to 2pm will be seen within one business day from when the request is received. A longer turnaround time for routine consultations is acceptable in certain clinical scenarios

EFFECTIVE DATE: July 1, 2016

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

APPROVED BY:

Reviewed:


June 22, 2016

when agreed upon by the consultant and the referring provider. Urgent consultations will be seen within 24 hours of the same day when the request is received. The results of such a consult will be communicated directly to the requesting provider in person or by phone call.

Requests for emergency STAT consultations require a verbal communication between attending provider and the consulting provider in addition to generating the electronic request. The results of such a consult will be communicated directly to the requesting provider in person or by phone call along with the full consultation note entered into the electronic medical record.

5. Documentation

At the completion of the consulting provider's evaluation of the patient, a brief consultation's note must be entered in the patient's electronic medical records indicating major findings and recommendation. The consultation note must include the date and time of the consultation, reason for the consultation, place of the encounter, and name of the requesting provider.

6. Responsibility of Requesting Provider

The requesting provider must acknowledge the findings, advice, or opinion of the consulting provider and take actions upon his/her recommendations and properly document it in the electronic medical record.

Attachment: Rancho Medical Staff Expected Practice: Inpatient Consultation

Reviewed:

July 05, 2013 TD

6/2/2016 RD

4/8/19 MS

2/15/23 MS

Rancho Medical Staff Expected Practice: Inpatient Consultations

Specialty: Rancho Inpatient Services

Subject: Inpatient Consultations

Date: January 27, 2021–Updated

Purpose:

To ensure a process that facilitates:

1. Communication and coordination of care between the primary inpatient provider and the consultant
2. Accurate and timely order entry related to consultations

Target Audience:

All Rancho providers caring for hospitalized patients

Expected Practice:

Consult Initiation/Communication: The primary provider enters the consult order in Orchid. The provider is expected to speak directly with the consultant to notify them of the consult and to clearly delineate the consult question. The provider identifies the consultant by checking AMION or calling the hospital operator. The provider then pages the consultant directly and enters a cell phone or pager as the call back number.

Following the consultation, it is expected that the consultant notify the primary provider about their documented recommendations/orders. These notifications may be via phone, in-person conversation, secure text message (i.e., HippaBridge), ORCHID messenger or email. Mutual notifications and communication are expected to occur at the initiation and termination of the consult as well as throughout the duration of the consultant's co-management as clinically indicated.

Type: All consultations are considered a request to "Consult and Manage" unless otherwise specified as "Consult Only." "Consult and Manage" means the consultant is expected to enter the orders directly and continue to co-manage the patient until they sign off. If the primary provider prefers to enter the orders themselves then "Consultation Only" should be specified on the original Orchid request. The consultant is

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expected to continue to manage the patient until they formally sign off by entering a note in the record stating that they are “signing off.”

Afterhours: For consults completed outside of regular work hours, the consultant is expected to communicate any significant issues to Physician A/B, enter time sensitive orders directly, and send a notification to the primary provider via the mechanisms outlined above.

Urgent/Stat Consults: For urgent/stat consults, the primary provider is expected to notify the consultant by speaking with them directly. In general, the expected turnaround time for responding to stat consults is within 1 hour. An extended turnaround time can be determined by the consultant after reassessing the urgency during the initial discussion.

Routine Consults: Expected turnaround time for seeing the patient and entering an initial note is within 1 business day if the consultant is notified before 2pm. A longer turnaround time is acceptable in certain clinical scenarios when agreed upon by the consultant and the referring provider.

Context:

Clear and timely communication between the primary provider and consultant is essential in ensuring high quality, coordinated care. Mutual notification between the primary provider and the consultant:

- provides an opportunity for early and ongoing discussion
- ensures that the consult question is clearly delineated
- ensures that the primary provider is aware of the consultant’s recommendations and orders

Direct order entry by the consultant enhances the accuracy of orders and facilitates a timely implementation of the plan of care. Individual providers or services (i.e., ICU, teaching services) may prefer to enter orders themselves and should indicate this preference by specifying “Consultation Only” on the original request. To ensure continuity, it is important that the consultant follow through with the management of the condition for which they were consulted until adequately managed by the primary, at which time they should document that they are signing off the case.

Author: MEC

Approved by the following committees:

1. Medical Executive Committee
2. Rancho Inpatient Services Committee