

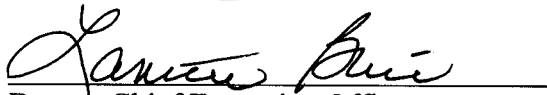
**LOUISIANA STATE UNIVERSITY
HEALTH CARE SERVICES DIVISION
BATON ROUGE, LA**

POLICY NUMBER: 9006-11
CATEGORY: Medical
CONTENT: Affiliated Medical Staff Policy
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Interim Chief Executive Officer
LSU Health Care Services Division

6-15-11
Date



Deputy Chief Executive Officer
LSU Health Care Services Division

6/8/2011
Date



Chief Medical Officer
LSU Health Care Services Division

6/3/11
Date

LOUISIANA STATE UNIVERSITY HEALTH CARE SERVICES DIVISION

Affiliated Medical Staff Policy

PURPOSE

LSU HCSD Hospitals and its medical staff are responsible for the quality of care and accessibility of services provided to and for the patient population seen throughout the system. Therefore it is the policy of LSU HCSD to support the implementation of the Affiliated Medical Staff category.

POLICY

To allow our patients to receive ancillary testing, consultations, and other outpatient services from any HCSD Hospital, a new medical staff category called "**HCSD Affiliated Medical Staff**" has been established. As a member of the HCSD Affiliated Medical Staff, a provider will be allowed to refer patients for diagnostic/outpatient services and/or consultant services at any LSU HCSD facility.

DEFINITIONS

"Affiliated Medical Staff" consist of those Physicians, Dentists, Clinical Psychologists, Podiatrists and other Licensed Practitioners who have an active staff appointment at one or more of the HCSD facilities. For example, if a provider has active staff privileges at one hospital, he/she will automatically have HCSD affiliated privileges at the other hospitals.

GENERAL POLICY PROVISIONS

MEDICAL STAFF MEMBERSHIP

1. Appointees to the HCSD Affiliated Medical Staff will include Licensed Independent Practitioners including Physicians (Doctors of Medicine and/or Osteopathy), Dentists, Oral Surgeons, Optometrists, and Podiatrists, holding a license to practice in the state of Louisiana, who can document their background, experience, training, judgment, individual character, and demonstrated competence, physical and mental capabilities, adherence to the ethics of their profession, and ability to work with others with sufficient adequacy to assure the Medical Staff, MEC, and LSU-HCSD Board that any patient treated by them will be given a high quality of patient care.
2. Appointees to the HCSD Affiliated medical staff do not have admitting privileges, are not eligible or required to attend medical staff meetings, vote or to hold elective office, and are not required to participate in medical staff committees at hospitals where they do not have an active staff appointment.

3. Minimal data including Louisiana Medical License, business address, and telephone number will be maintained by the Medical Staff Coordinator, or designee, to assure that the members of the HCSD Affiliated Medical Staff are duly licensed to refer patients for diagnostic/outpatient services and consultant services. This information will be available electronically to all HCSD hospitals via the MD-Staff™ Credentialing System.

LSU HCSD AFFILIATED MEDICAL STAFF PROCEDURES

1. The referring provider cannot provide the appropriate medical treatment or services for the patient at the referring facility.
2. If appropriate, the referring facility schedules the procedure/consultation appointment.
3. The referring provider writes an order for the patient to take to the receiving facility or uses an approved form. The order must include:
 - *Provider name*
 - *Preliminary diagnosis*
 - *ICD-9 Code*
 - *List of specific tests/consultations requested*
 - *Reporting preference (see below)*
4. The referring provider will note the method by which he/she would prefer to receive the results (fax or mail or e-mail). If the preferred method is mail, the results will be mailed to the primary mailing address.
5. The referring provider will also provide a contact name and phone number for notification of critical/panic values.
6. The referring Provider sends to the receiving hospital via the patient; diagnostic information (whatever is needed) related to the medical condition for which the individual has presented:
 - *Records related to the individual's medical condition*
 - *Observations of signs or symptoms*
 - *Treatments provided*
 - *Results of any tests*
7. Any other records that are not readily available at the time of transfer should be sent as soon as possible.
8. Patient arrives at the Admitting Department of receiving facility with order for diagnostic test, procedure or consultation.

9. The Admit Clerk shall verify in the MD-STAFF™ Credentialing System that the referring physician is current and in good standing at one of the HCSD facilities. If the physician is not located/verified in the MD-STAFF™ Credentialing System the Admit Clerk shall notify the Medical Staff Office and request the physician status be validated and appropriate additions be entered to allow the physician order to be completed.
10. The Admit Clerk verifies that the patient's order includes a contact name and phone number for notification of critical/panic values and indicates the method for providing routine results.
11. After verifying that the physician is in the MD-STAFF™ Credentialing System and a contact name and phone number for notification of critical/panic values is included, the Admit Clerk registers the patient in SMS and sends the patient to the appropriate department.
12. Patient hands orders to the receiving department. Written consent is obtained, if appropriate.
13. Department performs the test.
14. Results of the ancillary test and/or consultant services are forwarded to the referring physician as requested (fax, mail or e-mail) as well as to the Medical Records Department of the referring hospital. Critical/panic values are reported immediately as per protocol.

APPLICABILITY

This policy shall apply to all divisions and facilities of the LSU-HCSD.

IMPLEMENTATION

This policy becomes effective upon the approval and the signature of the Chief Executive Officer of the LSU-HCSD. Subsequent revisions to this policy shall become effective on the date the revised policies are approved by the Chief Executive Officer of the LSU HCSD or designee.

RESPONSIBILITY

It shall be the responsibility of each Hospital Administrator, Medical Director or designee(s) to adhere to the procedures set forth in this policy.