

Title: Call Coverage for Credentialed Medical Staff

Document Owner: Teresa Onken	PI Team: N/A	Date Created: 05/01/2015
Approver(s): Karyn Delgado, Teresa Onken	Approved with no Changes: 12/18/2018	Date Approved: 12/18/2018 06/15/2015
Location: Saint Joseph Regional Medical Center (SJPMC)		Department: Medical Staff Office

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POLICY:

1. This policy more thoroughly defines the requirements of call coverage and continuous care for medical staff members are treat patients in the outpatient setting in a specialty that differs from the inpatient privileges at the hospital.

PROCEDURE:

- A. To assure that all patients have continuous care, all medical staff members must have call coverage arrangements for all patients that they care for both in and out of the hospital if their patient needs to be treated in the hospital.
- B. If a physician is treating patients in the outpatient setting in a specialty in which they are not privileged in the hospital, it is the obligation of the physician to have call coverage arrangements with another appropriately privileged physician to take care of their patient if they come in to the hospital. The call coverage arrangements are to be communicated on their application and/or reapplication.
- C. Examples:
 - a. A family medicine physician sees general medicine patients and obstetrical patients in the office but is only privileged in Family Medicine and not OB in our hospital. It is the responsibility of that physician to provide continuous care for that OB patient who needs to be seen inpatient. Therefore, that medical staff member must identify and communicate their call coverage as part of their credentialing.
 - b. A family medicine physician who sees general medicine and pediatric patients in the office whose call coverage is an internal medicine physician. The family medicine physician would need to also identify who will provide pediatric call coverage if their pediatric patient needs to be seen inpatient. Therefore, the medical staff member must identify and communicate their appropriate call coverage as part of their credentialing.
 - c. A general and vascular surgeon who also performs ear surgery at an outpatient clinic but ear surgery is not part of the general and vascular surgery privileges at our hospital. If that ear surgery patient arrives at our hospital for care following that surgery, the general and vascular surgeon would need appropriate call coverage with a physician who is privileged for ear surgery procedures.
 - d. A podiatric surgeon who performs reconstructive ankle surgery at another surgery center and is not privileged for reconstructive ankle procedures in our hospital. The podiatrist would need to identify who would take care of this patient's complications related to reconstructive ankle surgery if that patient were to be admitted to our hospital.

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- D. The ERS call schedule is not an acceptable defacto call coverage arrangement. Individual members of a department call schedule can agree to provide coverage for a physician.

References/Standards:

- Policy Origin Date: May 2015
- Review Date: December 2015, December 2018
- Revised Date:
- Effective Date: June 2015
- Reviewed/Recommended By: Medical Executive Committee
- Policy 208