



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Medical Service		
Document:	Multidisciplinary Policy and Procedure		
Title:	Consultation Policy		
Applies To:	All Medical Staff		
Preparation Date:	July 9, 2023	Index No:	MS-MPP-003
Approval Date:	July 31, 2023	Version :	1
Effective Date:	August 13, 2023	Replacement No.:	MS-MPP-003 (N)
Review Date:	August 13, 2026	No. of Pages:	3

1. PURPOSE:

- 1.1 Set guidelines and responsibilities for the process of physician's consultation in the Maternity and Children Hospital, Hafer Al Batin.

2. DEFINITIONS:

- 2.1 **Consultation** – is the process whereby, on request by one physician, another physician reviews a patient's medical history, examines the patient, and makes recommendations as to care and treatment.
- 2.1 The physician consulted could be expertise in the same or different specialty or in a subspecialty

3. POLICY:

- 3.1 Referral to specialized care will be done by the attending physician when there is need for prompt and expert specialty evaluation and management advice that benefit the patient and meets the expectations of both the patient and requesting physician.

- 3.2 Each head of the department should encourage his or her staff for direct communication with the consulted physician for discussion and addressing the specific questions to be answered.

3.3 Types of Consultation:

- 3.3.1 **Immediate/Emergent:** Consultation from the emergency department could be immediate if it includes life, limb, or function threatening. Management should start immediately and timelines of phone response and consulted physician physical presence should be within 30 minutes

- 3.3.2 **Urgent:** the patient should be seen by the consulted team within 1 hour.

- 3.3.2.1 Medical and other relevant staff who are on call should respond promptly to incoming consultations and care related requests.

- 3.3.3 **Non – Urgent:** the patient should be seen by the consulted team within a maximum of 24 hours. The resident may call the consulted team to inform about the consultation.

- 3.3.4 For **immediate**, emergent and urgent consultations, the consulting physician or his/her delegated specialist should personally call the consulted team (Consultant/ Specialist) to request the consultation and provide the necessary information about the patient. Consultant to consultant basis is preferred.

- 3.3.5 For Consultations from outside the hospital e.g., vascular, orthopaedic surgery consultation.

- 3.3.5.1 Send a fax with required information.

- 3.3.5.2 For urgent and immediate consultations, direct communication with the other hospital on call physician is done through the medical coordination office.

- 3.3.6 After seeing the patient, the consulted physician should document his/her opinion and recommendations and communicate with the attending physician and report to him/her views and suggestions.

- 3.3.7 The consulted physician do not assume overall responsibility for the patient. He/ She documents her suggestions on the consultation form. The primary consultant and his / her team are responsible for writing the orders in the physicians order sheet.

4. PROCEDURE:

- 4.1 Consultation is ordered by the assigned consultant, requesting consultation form a colleague, subspecialty, or referral to another clinic or service.
 - 4.1.1 The consultant /his/her designee writes the consultation form. It should be indicate:
 - 4.1.1.1 Date and time of consultation.
 - 4.1.1.2 Name and designation of consulting physician.
 - 4.1.1.3 Name and designation of consulted physician.
 - 4.1.1.4 Complete patient name, medical record number and location.
 - 4.1.1.5 Case Summary
 - 4.1.1.6 Rationale for consultation; a clear concise request indicating the reason for consultation or a question to be answered.
 - 4.1.1.7 Urgency or time frame within which the patient to be seen, (24 hours for routine inpatient consults and one hour or less for emergency cases).
 - 4.1.1.8 The consulting physician/his/her designee will countersign and stamp the form indication date and time of consultation.
- 4.2 The consulting team specialist/resident should:
 - 4.2.1 Contact and discuss the case with the consulted physician/team and whenever possible, arrange for a consultation time during which both the treating and consulted teams are available beside the patient to discuss the case.
 - 4.2.2 SOD/ROD record on the progress notes the time and date when he/she contacted the subspecialty team and the time of their arrival.
 - 4.2.3 If the consultation is from outside the hospital e.g., orthopaedic or vascular surgery. Sends a fax to the consulted hospital specialty indicating:
 - 4.2.3.1 Patient's demographic information and medical record number.
 - 4.2.3.2 Purpose of consultation.
 - 4.2.3.3 Type of consultation; urgent (within 30 minutes), and regular.
 - 4.2.3.4 The requested specialty and required service.
 - 4.2.3.5 Patient's current vital signs and updated medical report with diagnosis, results of relevant investigations and current treatment.
 - 4.2.3.6 Signed by the MRP in his/her designee with date and time and method of communication e.g., mobile or hospital number.
 - 4.2.4 If consultation is urgent, the most responsible physician/ designee will directly contact the required responsible physician at the other hospital through the communication between MCH on duty manager and the receiving hospital on duty manager.
 - 4.2.5 During morning working hours (0730H until 1600H) the consultation should be seen by the consultant him/herself. After regular working hours (after 1600H) the specialist can see the case and endorses to the consultant concerned regarding the consultation when seen.
 - 4.2.6 When the consulted physician goes to see the case, he/she should:
 - 4.2.6.1 Document opinion and recommendations
 - 4.2.6.2 Read what his/her specialist has written, correct and counter sign the consultation form.
 - 4.2.6.3 Document date and time of consultation visit to discuss the case.
 - 4.2.6.4 Communicate with the consulting physician/his/her designee
 - 4.2.7 The assigned nurse will assist the consulting team during their visit, document date and time and any event.
 - 4.2.8 After proper screening and assessment of patients, the assigned consultant may send consultation to social – service, dietician, rehabilitation, religious services according to the needs of each patient.
All documented consultation forms are kept in the patient's medical record.
- 4.3 Department head will monitor the consultation process in his/her department and its implementation according to the policy.

5. MATERIALS AND EQUIPMENT:

- 5.1 Consultation Request Form
- 5.2 Physician Order Form

6. RESPONSIBILITIES:

- 6.1 All Physician (Consultant, Specialist and Residents)
- 6.2 All Nurse

7. APPENDICES:

N/A

8. REFERENCES:

- 8.1 Kingdom of Saudi Arabia, Ministry of Health Policies and Procedures, 2013.

9. APPROVALS:

	Name	Title	Signature	Date
Prepared by:	Ms. Almira Maila Dee Chin	Document Management Control Coordinator		July 9, 2023
Prepared by:	Dr. Shimaa Biomy Jmal Emara	Quality Facilitator in Medical Administration		July 9, 2023
Reviewed by:	Dr. Amal Al Harbi	Pediatric Emergency Room Head of the Department		July 13, 2023
Reviewed by:	Dr. Sarhan Alshammari	NICU Head of the Department		July 13, 2023
Reviewed by:	Dr. Mohannad Yaghmour	Obstetrics and Gynecology Head of the Department		July 13, 2023
Reviewed by:	Mr. Abdulelah Ayed Al Mutairi	QM&PS Director		July 17, 2023
Reviewed by:	Dr. Tamer Naguib	Medical Director		July 17, 2023
Approved by:	Mr. Fahad Hezam Alshammari	Hospital Director		July 31, 2023