

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety
Prison

SECTION: Care and Treatment of Patient –
Access to Services

POLICY # TX I-2

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SUBJECT: Specialty Medical Clinics

EFFECTIVE DATE: September 2016
SUPERCEDES DATE: May 2002

Reference:

ACA

Standard 4th Edition
4-4348

PURPOSE

To provide guidelines for accessing specialty medical clinics.

POLICY

When the attending physician determines that the patient has a condition which requires evaluation by a specialist, such arrangements must be in accordance with Utilization Review Guidelines.

PROCEDURE

1. When in the opinion of the attending physician (primary care unit doctor) that care needed cannot be rendered by him/her, a request will be made to the utilization review section for the use of local specialty consultants or contracted specialists.
2. The referring facility will initiate a consultation request (UR Request) in the Electronic Health Record (EHR) for each visit for specialty consultation, both internal and external.
3. Whenever possible, established in-house specialty clinics should be used.
4. The outpatient medical record and necessary documentation from the HER (i.e. clinical encounters, UR Consultation Request, labs, etc.) will accompany the inmate to his appointment.
5. Copies of the consultant's recommendations will be returned with the inmate to the correctional facility and scanned into the EHR.
6. The attending physician shall review all consultant orders derived from non-prescribing privileged providers i.e. community ER physicians, community providers, etc. prior to implementation.
7. Contracted specialists shall document patient care in the EHR to include the plan of care using the CPOE (Computerized Physician Order Entry) Screen.

Paula Y. Smith, M.D.

9/20/2016

Paula Y. Smith, MD, Chief of Health Services

Date

SOR: Deputy Medical Director