

IHE Work Item Proposal (Short)

# Proposed Work Item: <IHE Referral Matching>

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Domain: Patient Care Coordination

# The Problem

The exchange of clinical data between providers is needed to accomplish safe and effective patient care. Many such exchanges follow a referral / referral response process. The majority of referrals are typically not a single transaction. Many times, it involves additional messages to complete the referral process. Currently, there is not a standard way to match together referral responses or additional documents to the initial referral transaction.

As patients move within and across healthcare settings, providers send and receive multiple referral transactions relating to the same referral. Today, these transactions are manually managed. The ability to electronically manage these transactions is needed.

The purpose of this content profile: Provide a mechanism to facilitate programmatic matching/linking of related outbound and inbound referral transactions for the same patient to/from the same specialist.

# Key Use Case

PCP refers a patient to a specialist. After the consultation request is sent, PCP may need to amend the original information in the request and/or provide additional information.

Specialist responds to the PCP with a consultation summary. After the summary is sent, the specialist may need to amend the original information in the consultation response and/or provide additional information.

The PCP and specialist may also need to exchange additional (referral specific) correspondence

# Standards & Systems

Standards

* CDA – Header
* CCDA – CCD for the Referral Request
* CCDA – Consultation Note for the Referral Response
* XDR (for Direct exports and inbound documents)

Systems

* EHR
* PHR
* Patient Portal
* HIE

# Discussion

This should be a Patient Care Coordination content profile. . IHE would be a good venue to solve this problem because it involves developing a profile across several existing standards. It has the necessary expertise in PCC to address content issues as well as functional workflow. This profile differs from XDW in that it does not track statuses. This profile is a content profile that streamlines the referral workflow by focusing on the referral request and the referral response. However, there may be other use cases where the ability to streamline workflow processes is provided utilizing the concept of this content profile.

# Detailed Use case

A PCP is in the middle of an encounter (office visit) with a patient and determines that the patient needs to be referred to a specialist. The PCP is documenting the encounter in the EHR and within the EHR prepares the consultation request for the specialist. The message is addressed to the appropriate specialist, specialty or provider organization and is sent to the specialist’s EHR system. The consultation request can contain a clinical summary with discreet data elements as well as other documents.

After the PCP sends the consultation request, he may need to

* Amend original information in the referral (including patient-specific clinical information – e.g., a change in medication)
* Provide additional information about the patient before specialist encounter
* Provide additional information about the patient after specialist encounter

The specialist office receives the consultation request from the PCP and processes it accordingly. The patient is seen. The specialist documents the encounter in the EHR system and prepares the consultation summary for the PCP. Once the consultation summary is prepared, it is addressed and sent to the PCP’s EHR system. A copy of the message is retained in the specialist’s EHR system.

When the specialist receives the consultation request, he may need to request

* + Additional information about the patient from the PCP before the visit

The consultation summary is received into the PCP EHR system. Once received, additional practice variable activities may occur: tasks can be directed to a front desk staff EHR system work queue for appropriate distribution to additional staff’s EHR system work queues, as appropriate to the practice workflows; discrete data elements from within the consultation summary may be promoted to the PCP’s EHR system. In accordance with practice policies and EHR functionality, the PCP may review and promote to the EHR the specialist-reconciled data elements which may become part the of the patient’s EHR (all date/time/source stamped). The consultation summary and any additional content may be retained in its entirety as a permanent part of the patient’s EHR record.

After the specialist sends the consultation summary, he may need to

* + Provide additional information to the PCP after the specialist visit is complete
  + Amend the original findings to the PCP after the specialist visit is complete

The PCP and Specialists may also need to exchange additional (referral-specific) correspondence.

Currently, there is not a way to link amended or additional information to a referral transaction after the message has been sent and received. This proposed IHE profile will allow the ability to do the following by enabling the ability to link amended and additional information to the referral message.

PCP sends the consultation request. Specialist receives request. PCP sends amended and/or additional information to specialist. Information is linked to the original consultation request.

Specialist receives the consultation request from the PCP. Additional information is request in order to provide care for the patient. Request for information is linked to the initial consultation request in the PCP system. PCP sends the requested information which is linked to the referral request in the specialist system.

After the specialist sees the patient, he sends the consultation summary to the PCP. He may need to provide additional and/or amended information to the PCP after the consultation summary is sent. This information is linked to the original consultation summary in both the PCP and Specialist EHRs.