

## **Unified Communications**

MSH BA Workflow

Last Updated 5/3/23

### **Calls to Zoom Numbers**

1. All Zoom numbers start with area code (332)
2. Attendings, PAs, Full time nurses have zoom numbers.
3. EM Residents have area code (646) Cisco phones

### **Escalation Pathways**

1. If Attending does not pick up, transfer call to Administrator on Call
2. If Resident does not pick up, transfer call to Attending
3. If PA/Resident does not pick up, transfer call to:
  - a. Patient's Primary PA Listed in Midlevel column
  - b. Ext (Extender) Column
  - c. Patient's Attending
  - d. Administrator on Call
  - e. Medical Directors
4. If Primary Nurse does not pick up, transfer call to:
  - a. If nurse is covering, they should put their name on. If two names, contact both as there may be trainees.
  - b. Charge RN
  - c. ANM
5. If PAIC does not respond
  - a. Monday through Sunday PA in Charge is the Callback PA from 9A-2PM. The PAIC phone at 212-241-8567 is forwarded to this specific PA's cell phone number who answers the call. Often the PA is on the phone with a patient and other calls come in, but patients should be able to leave a voicemail on the PA's cell phone.
  - b. Monday Through Sunday PA in charge from 2P-7P is the RETU PA and the RETU PA's have been directed to forward the PAIC phone 212-241-8567 to their Zone phone during this time.
  - c. Nights/Weekend Shifts: Mon-Thursday: When there are 2 PA's in RETU overnight 7P-7A, PA in charge is still the RETU PA and PAIC phone should be forwarded to RETU PA's zone phone as above.
  - d. Friday-Sunday overnight 7P-7A, there is not a PA in charge as RETU has single PA coverage and all PA in charge calls should be directed to PIC (Acute 2 Attending)
  - e. Send "ED Callback PAs" message via Epic secure chat with patient's name and contact number.
6. If PIC does not respond
  - a. Administrator on Call or Epic secure chat to MSH ED Physician AOC

### **Calls By Type**

**1. Pre-arrival**

- a. Route to 43611 call-in line (aka AMAC)
  - i. AMAC will make 3 attempts to transfer call to PIC

**2. Active ED patient**

- a. Verify if patient is an ED patient or a boarder
- b. Verify caller prior to giving patient's information
  - i. "Good Morning/Good Afternoon/Good Evening,

Mount Sinai Emergency Department this is (Name of BA) speaking, how may I help you?

- Identify who the caller is and what the request is

"Can I please place you on a brief hold while I transfer the call?"

- ii. Considerations for sensitive issues like SAFE, SA, CA, etc.
- c. Direct the call
  - i. "Please hold while I transfer you to the patient's care team"
  - ii. Clear call for patient's RN: Transfer to listed RN on team (follow escalation)
  - iii. Clear call for provider or "doctor": Transfer to listed "midlevel" in EPIC on patient team (follow escalation)
  - iv. Unclear care team need ex. "I want to talk to someone taking care of my mom"
    - 1. Take message and conveys to patient team (RN and providers) via Epic secure chat
    - 2. "Please provide me with your name and the best contact number. A member of the care team will call you back"

**3. Admitted Patient (boarding)**

- a. If member of care team in hospital – transfer to RN
- b. If family – take message and message whole care team including IP providers

**4. Transfer center**

- a. Transfer to PIC (listed as role in EPIC)

**5. Prior patient request for information (test results, questions, etc.)**

- a. Transfer to PAIC

**6. Other clinical questions**

- a. Take a message and convey to PAIC with Epic secure chat.