

INCOMING PATIENT REPORTS AND CONSULTATIONS PROTOCOL

Summary of Changes

	NEW	Previous
BC Cancer	<p>16-MAR-2023</p> <p>New template as per SHOP style guide; converted policy to protocol document type as per SHOP style guide; pathway charts to demonstrate process; detailed CERNER and CAIS steps included</p>	<p>Created September 1, 1993</p> <p>Revised: February 26, 2013</p> <p>Approval date July 18, 2013</p> <p>Reviewed – December 20, 2018</p>

INCOMING PATIENT REPORTS/CONSULTATIONS PROTOCOL

1. Introduction

1.1. Focus

In order to facilitate the provision of appropriate and adequate ongoing medical care, BC Cancer physicians must be fully informed of all relevant medical information regarding their patients.

This protocol will outline this process in [CAIS](#) and in [Cerner](#). The intent is to have a common electronic health record for PHSA/VCHA/PHC sites, so that the patient has one health record regardless of where they attend within the three health authorities.

1.2. Health Organization Site Applicability

All BC Cancer Sites

1.3. Practice Level

- Physicians
- Clerks

1.4. Definitions

CAIS: The electronic health record used by any BC Cancer sites not yet on CST Cerner. Not all patient documentation is in CAIS.

CST Cerner: The electronic health record used by any BC Cancer site where CST-Cerner has been implemented.

1.5. Need to Know

For BC Cancer sites where CAIS is the patient electronic record, all incoming information/reports on BC Cancer patients are incorporated into the electronic chart and brought to the attention of the patient's Most Responsible Physician unless specifically exempted by the Clinical Records Committee or if the patient has been discharged from BC Cancer.

For BC Cancer sites where CST-Cerner is the patient electronic record, all incoming information/reports on BC Cancer patients are incorporated into the electronic record. Any documents ordered by, addressed to or copied to BC Cancer physicians will be brought to the attention of the BC Cancer physician unless specifically exempted by the Clinical Records Committee. Any faxed/scanned external documents copied to BC

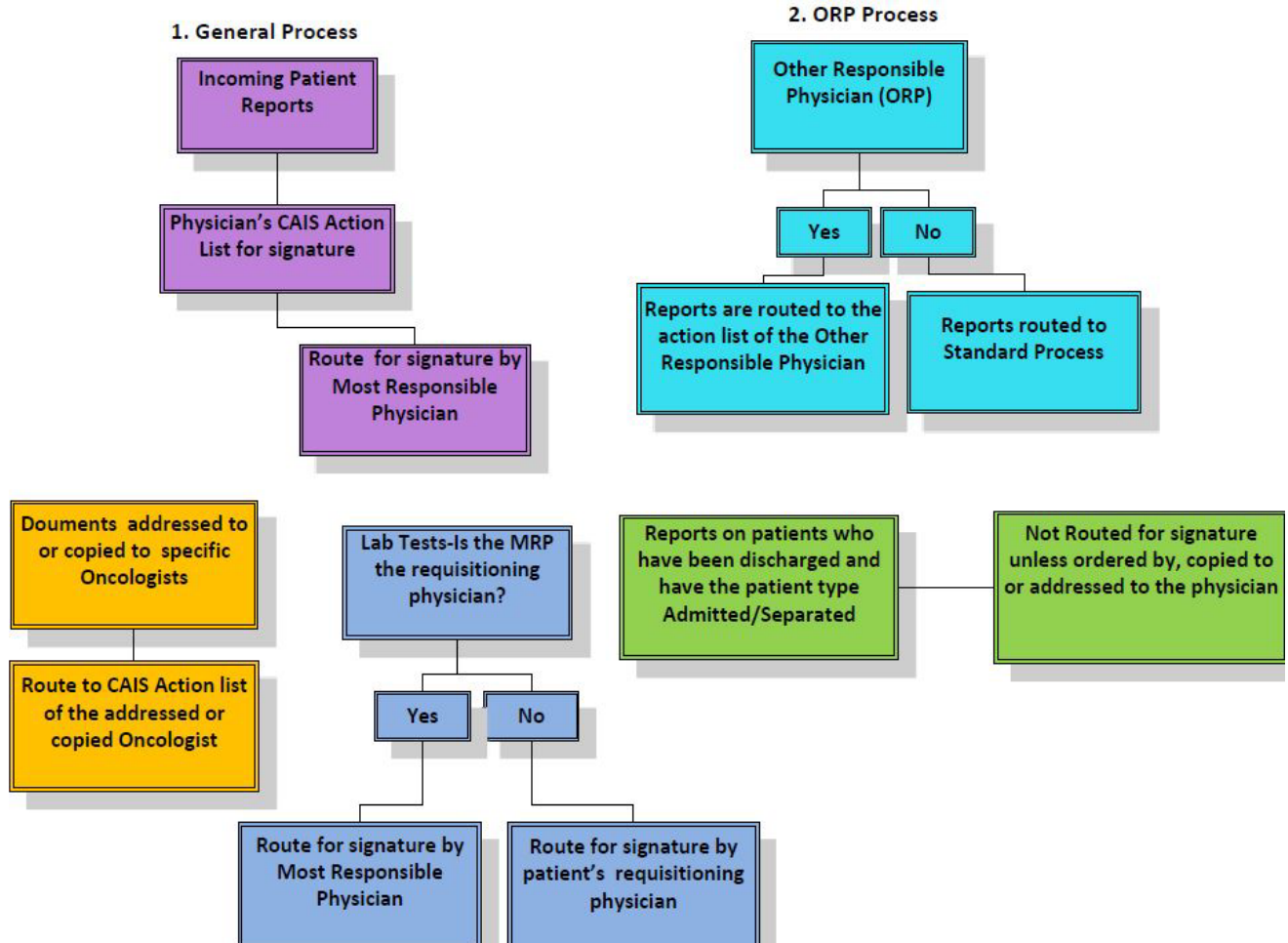
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Cancer or a BC Cancer site will be brought to the attention of the patient's Oncology Lifetime Provider or to the BC Cancer Consultant caring for the patient.

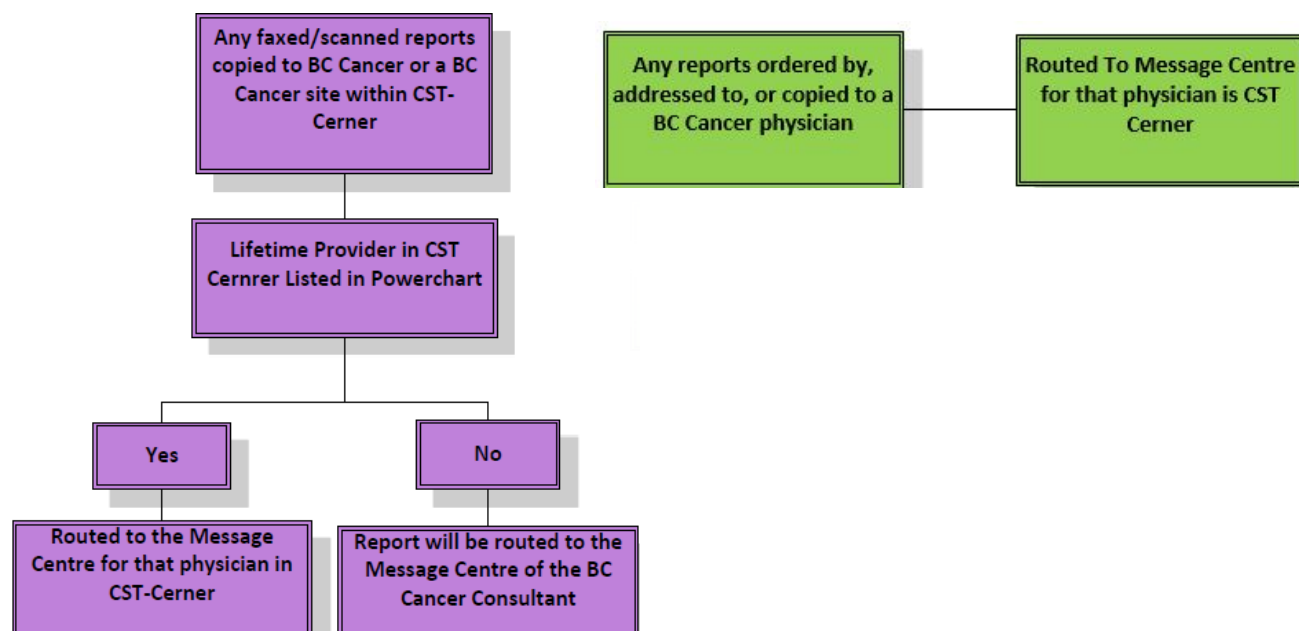
2. Protocol

CAIS



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CERNER



2.1. Protocol

BC Cancer sites working in CAIS:

1. Incoming patient reports will be routed to the physician's CAIS action list for signature by the patient's Requisitioning Physician and for review by the Most Responsible Physician unless the Requisitioning Physician is also the MRP, in which case the reports will be routed for signature to the MRP's action list. Exceptions include (see [Section 2 "Protocol \(CAIS\)"](#) of this document):
 - Laboratory test results will be routed only to the Requisitioning Physician for signature unless the MRP is the Requisitioning Physician – in which case the results will be routed to the MRP for signature.
 - Reports on patients who have been discharged and have the patient type Admitted/Separated will not be routed for signature.
 - When there is an Other Responsible Physician (ORP), reports will be routed to the action list of the ORP as an FYI.
 - Letters addressed to specific Oncologists will be routed to the action list of that Oncologist regardless of patient type.

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2. When patients are not currently, but may at a later date become BC Cancer patients, their correspondence/reports remain in the Cancer Agency Information System (CAIS) for the B.C. Cancer Registry.
3. When Agency staff order outside tests, the results may be released to the community physicians as part of continuing care.

2.2. Site Specific Practices

For BC Cancer sites working in CST-Cerner:

1. Any reports ordered by, addressed to, or copied to a BC Cancer physician will be routed to the Message Centre for that physician in CST-Cerner.
2. Any faxed/scanned reports copied to BC Cancer or a BC Cancer site within CST-Cerner will be routed for signature to the Oncology Lifetime Provider in CST-Cerner. If the Oncology Lifetime Provider is not shown in CST-Cerner PowerChart, the report will be routed to the Message Centre of the BCC Consultant.

2.3. Documentation

The [Medical Staff Professional Rules and Regulations](#) will determine the specific policy requirements for documentation.

3. Related Documents and References

3.1. Related Documents

MRP Implementation Summary and Updates found on the H: Drive – Everyone – MRP Help –Implementation Summary and Updates

3.2. References

[PHSA Medical Staff and Professional Rules and Regulations](#)

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Approving Body:	Medical Advisory Committee (MAC) Clinical Records Committee (CRC)		
Final Sign Off:	Name	Title	Date Signed
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	Clinical Records Committee		27-JAN-2023
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	Clinical Records Committee		PHSA-BC Cancer
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	Audrey Barry	New BC Cancer Protocol template	24-NOV-2022
	Policy Office	Cerner and CAIS steps	
		Pathway charts	