

New Patient Referral Management Policy

Summary of Changes

	NEW	Previous
BC Cancer		PIM 060-IV-A-30 Patient Referral. Oct 1/89. Revised Oct 17/11

Released:	18/APR/2019	Next Review:	18/APR/2022	
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1. Introduction

1.1. Purpose

To articulate how BC Cancer handles new patient referrals.

1.2. Scope

This Policy applies to referrals received by BC Cancer for consultation with an Oncologist.

The Medical Staff Professional Rules and Regulations determine the specific policy requirements for documentation.

1.3. Exceptions

This Policy does not apply to other PHSA services and programs.

2. Policy

2.1. Policy Statement #1

Referral to BC Cancer must originate from a physician or nurse practitioner accompanied by a written request containing standard elements per College of Physician and Surgeons of BC professional guidelines for referral-consultation process.

2.1.1

Referring provider/ provider office will receive a confirmation of receipt of referral.

2.1.2

Referrals to BC Cancer will be e-triaged by physicians or delegated staff with formal medical training. All cases are to be reviewed by triage providers within 48 hours after the referral is ready to be triaged.

2.1.3

Incomplete referrals may be rejected for triage. The referring physician is to be contacted with form letter indicating that the referral is not accepted and reason(s). The triage physician may dictate a courtesy letter to the referring physician instead of this form being used.

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3. Responsibilities and Compliance

3.1. Responsibilities

All BC Cancer Triage Physicians and HIM processing referrals are responsible for adhering to this policy.

3.2. Compliance

Anyone processing or triaging a referral is required to comply with this Policy. Non-compliance may result in unsatisfactory patient care experience.

4. References

<u>H:\EVERYONE\MedicalStaff\Policy Reference Documents\MEDICAL STAFF RULES PHSA BD (Feb 5.09)</u> <u>.pdf</u>

Procedure of new patient referral:

https://www.cpsbc.ca/files/pdf/PSG-Referral-Consultation-Process.pdf

http://www.bccancer.bc.ca/health-professionals/referrals

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Approving Body:				
Final Sign Off:	Name	Title	Date Signed	
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	Clinical Records Committee			
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	Committee			
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