

## **ANMC Department Service Agreement Surgery and Family Medicine Departments**

The following is a collaborative service agreement between the Surgery and Family Medicine departments. The departments agree on the following scope of practice for the provision of primary & specialty care.

### **Core Competencies:**

Surgery will provide the following core services:

- Treatment and complex work-up of a surgical diagnosis and surgical intervention
- Non-cardiac surgeries
- Lower GI Endoscopy for adult and pediatric patients
- Upper GI Endoscopy for patients over the age of 10. For patients under the age of 10 a phone consult is required.
- GI
- Vascular
- Breast
- Evaluate and recommend high risk patients for breast cancer chemotherapy prevention
- Post-operative pain management as appropriate for the surgical procedure and patient (to be dictated into the post-op note and discharge note)

Family Medicine will provide the following core services:

- •Diagnosis and initial work-up of a surgical diagnosis based on referral guidelines
- Pre-operative medical clearance for uncomplicated patients. (Patients with COPD, DM, heart disease may be referred to Internal Medicine for medical clearance)
- Chronic pain management
- Primary Care Provider and/or Case Manager will make social rounds to admitted patients at least once during admission for admissions greater than 24 hours. PCP and/or Case Manager will make social rounds within 24 hours of notification.

### **Access Agreements**

Surgery will provide the following access:

- All patients will be offered an appointment within one day for any problem
- All patients requiring an operating room surgical intervention will be offered an OR time within 5 days of that determination
- Immediate access for urgent and emergent conditions

Family Medicine will provide the following access:

- Same day access offered for all Family Medicine enpanelled patients who can schedule by 4:00 p.m. and arrive in the clinic by 4:30 p.m. Monday - Friday
- Evenings between 5:00 p.m. – 8:00 p.m. and Saturdays between 8:30 a.m. and 4:30 p.m. the clinic is staffed with 2-3 providers who cover the practice for customer convenience and urgent needs for customers who can schedule by 7:00 p.m. and arrive by 7:30 p.m. in the evenings and customers who can schedule by 4:00 p.m. and arrive by 4:30 on Saturdays

### **Consultation / Treatment Process**

- *In order to avoid delays referring clinic agrees to use the standard ANMC evaluation and consultation process*
- 8:30 a.m. – 4:30 p.m. use standard ANMC evaluation and consultation process (see flowchart)
- 4:30 p.m. – 8:30 a.m. fax /scan evaluation and consultation form to Surgery

### **Communication Process**

- Family Medicine will identify patients who have complex issues such as, pain contracts, medical, logistical or social issues, when sending a consult
- Dictated summary of consults, hospitalization, surgery & end of care summaries, outlining findings and recommendations for care on all patients to include pain management and anticipated follow-up. Send cc to PCP.
- Surgery will notify the patient's Primary Care Provider during the time of an admission to Surgery Service or within 48-72 hours of a surgical procedure.

- Home Based Services (HBS): in the event a post-op patient requires HBS, Surgery personnel will be responsible for referring the patient to the HBS team. This includes completing the necessary paperwork for prescriptions, equipment and nursing orders. Surgery will authorize the transfer of care to the Primary Care Provider in accordance to the MCD/MCR guidelines.
- Post-op wound care: Surgery will communicate post-op wound care needs with the patient. If the patient requires assistance with their wound care, the Surgery clinic personnel will arrange for appropriate follow-up
- Post-op pain management: Surgery will manage the post-op pain for the expected post-op recovery time. In the event the patient requires pain management beyond the anticipated recovery period, the Surgeon will communicate the patient's status with the Primary Care Provider prior to the transfer of care.

**Consultation / Treatment Guidelines** (for each consultation guideline include graduation criteria)

- The process for approving guidelines:
  - Guidelines developed at department (or other) level
  - Department presents guideline to appropriate Clinical Core Business Group (CCBG)
  - After CCBG approval guideline goes to PIC for final approval
  - After PIC approval guideline is posted on ANMC intranet
- Current guidelines:

Surgery	FMC
<ul style="list-style-type: none"> <li>• Breast disease</li> <li>• Colonoscopy</li> <li>• EGD</li> <li>• GERD</li> <li>• Hernia</li> <li>• Skin and sub-cutaneous nodules</li> <li>• Thyroid nodules</li> <li>• Breast cancer chemotherapy prevention (pending)</li> <li>• Cholelithiasis</li> </ul>	<ul style="list-style-type: none"> <li>• Chronic Pain fact sheet</li> </ul>

**Quality Assurance Agreements**

- Service agreements will be reviewed, updated and approved bi-annually with final approval by the SCF VP of the Medical Services Division and the ANMC Administrator.
- Training and education needs can be requested by either service. Each service is responsible for responding in a timely manner.
- Quality review of the system will occur on a regular basis. Metrics to include:
  - % of time guidelines are met
  - % of time processes are followed
  - % of time adequate information is provided to consultant clinic
  - % of time adequate information is provided to referring clinic
  - % of time appointment is booked using the phone process
  - % of dictation consultation summary received

Frank Sacco, MD

MD

Signature of Surgery Medical Director

Allen Smith,

Signature of Family Medicine Medical Director

Douglas Eby, MD MPH

RN

Signature of SCF Vice President Medical Services

Dee Hutchison,

Signature of ANMC Administrator