

**ADVOCATE SHERMAN HOSPITAL**  
**Medical Staff Department Procedures/Rules for**  
**Emergency Department Follow-up Visits**

- Family Practice Department – Rules & Regulations - “The ER on-call physician follows up on the patient for 30 days.”
- Medical Department – Rules & Regulations - “The on-call physician is obligated to see patients referred by the ER within 5 business days for treatment of the acute problem or refer the patient to another healthcare provider. If a patient is readmitted through the Emergency Department within 30 days, the care of the patient should be assumed by the previous treating physician. If a patient presents to the Emergency Department after 30 days, and obtains no primary care physician, then the patient should be referred to the doctor on call through the Emergency Department.

Revised/Approved Medical Department, MEC, BOD 11/24/14

- OB/GYNE Department – Rules & Regulations -
  1. Pregnant patients treated (defined as physically seeing or direct phone call consultation to the ER physician) in the Emergency Department by the OB/GYNE on-call physicians will be followed thru the completion of the pregnancy by the physician who initially treated the patient.
  2. Patients will be told they have the option of remaining under the treatment of the on-call physician or of being seen by a physician at Aunt Martha’s or the Greater Elgin Family Care Center if the on-call physician does not accept their insurance.
  3. All other patients returning to the Emergency Department within 30 days of the initial visit will be considered under the care of the physician seen at the initial visit.
  4. GYN patients treated (defined as physically seeing or direct phone call consultation to the ER physician) by the on-call physician will be followed for 30 days. When only an ER referral has been given without the on-call physician being notified of the referral while the patient is in the ER i.e. the on-call physician was never notified of the patient being in the ER, if the patient returns to the ER they will be cared for by the current on-call physician.
- Pediatrics Department – Rules & Regulations - “For both newborn and pediatric patients admitted to Sherman Hospital the on-call physician who is assigned to that patient is responsible for their care for two weeks following that admission. The On-call physician is responsible for a post emergency department visit to treat the acute problem within two business days (96 hours).”
- Surgical Department –Hospital personnel shall be on call for emergency surgery. A published on-call list shall be maintained in the Nursing Supervisor office. These persons on call will be available to the hospital for emergency service.

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- a.) A patient requiring post emergency department or urgent care facility visit outpatient care who does not have a private physician will be assigned to the physician on call in the applicable department or service.
- b.) The patient seeking post emergency department or urgent care facility visit outpatient care from the physician-on-call is responsible for contacting that physician's office within 96 hours of discharge from the emergency department or urgent care facility.
- c.) Once contacted by the patient within the 96 hour period the physician-on-call must provide follow-up care, including appropriate diagnostic and therapeutic modalities to treat the acute problem leading to the emergency department or urgent care facility visit and also including at least one physician examination, if the patient so chooses.
- d.) If the physician is not contacted by the patient in the prescribed period then there is no responsibility to see or treat the patient. The physician is expected to seek payment for services rendered; however, services for follow-up care for the acute problem managed in the emergency department or urgent care facility may not be denied due to inability to pay or due to delay in payment.
- e.) The responsibility of the physician-on-call's follow-up care is completed when any one of the following occur:
- There is a resolution of the patient's acute problem.
  - There is an arrangement for transfer of the patient to another health care provider, by the physician or patient.
  - There is formal written termination of the patient-physician relationship, with the allowance of a reasonable time for the patient to seek alternative care, prior to terminating interim care.
- f.) Disputes about follow-up care may be referred to the emergency services medical director; however, responsibility for follow-up care remains the physician-on-call's duty unless released by the emergency services medical director, even if disputed. Further discussion of disputes may be handled by Surgical Steering Subcommittee. Unresolved or recurring conflicts may be referred to the Medical Executive Committee for formal resolution. As before, disputation does not release the assigned physician-on-call from follow-up care unless he/she is formally released.