



## **Skyline Hospital Nursing Outpatient Services**

### **Tips for Successful Patient Scheduling**

#### **REFERRAL FORM**

- Fill out the form in its entirety. Leave no blanks. Do not use unacceptable abbreviations. This referral will become part of the patient's medical records and serve as the template for the hospitalist to enter patient care orders.
- Do not substitute this referral form with any other form (i.e. a prescription, clinic note, etc.). This form has been developed to include the information needed to schedule and care for the patient.
- Write legibly.
- It is acceptable to write 'per hospitalist' or 'per pharmacist' for frequency and/or dose, and our staff will adjust the orders appropriately.
- 'Start Date' can be 'ASAP' or the date of the referral, but must be filled out. We will not make any assumptions on the referring provider's orders.
- 'Stop Date' can be N/A if you are unsure of a stop date and plan to continue the infusion for an unspecified amount of time (the referral will expire in one year if the end date is not specified).
- When ordering blood products please utilize the 'ORDER' section.
- If the referral form is incomplete, it will be sent back to the referring provider for completion BEFORE patient scheduling. This may delay patient scheduling and care.

#### **PRIOR AUTHORIZATION**

- The referring provider is encouraged to obtain prior authorization and send it to Skyline Hospital with the referral to expedite the scheduling process for the patient. Please provide an authorization number and/or letter with the Referral Form. If there is no authorization necessary, please write 'n/a medicare/medicaid,' or 'spoke to insurance, n/a' so we know you have acknowledged this request. Skyline will contact the patient's insurance company to verify prior authorization prior to scheduling.
- If prior authorization is NOT obtained by the referring provider, additional information may be requested by Skyline Hospital's Business Office to obtain prior authorization. Please send the patient's insurance information with the referral to expedite obtaining prior authorization. Please note this may delay patient scheduling.
- We will contact the patient to schedule as soon as we receive the completed referral and prior authorization.

#### **GENERAL INFORMATION**

- If the Outpatient Services are emergent or the patient is unstable, please refer them to the nearest Emergency Department.
- If the Outpatient Services are urgent, please call Skyline Surgical Services directly and ask to speak to the OR Manager or Hospitalist on call at 509-637-2814 (8 a.m. - 4:30 p.m.), or a Skyline Emergency Provider at 509-637-2952 (4:30 p.m. - 8 a.m.).
- We will not treat anyone as a 'walk-in'. The referral must be received and the patient must be scheduled before arrival in order to receive Nursing Outpatient Services.
- It may take at least a business day to obtain specific drugs for Nursing Outpatient Services.

If you have any addition questions, please feel free to call Skyline Surgical Services at 509-637-2814.