FACT SHEET

Care of patients that do not have an established relationship with a physician with privileges to practice at the hospital

Question | If a patient’s physician doesn’t hold privileges to practice at a hospital, what are the standard protocols and procedures in connection with that patient’s care?

Answer | When a patient is treated in the hospital’s emergency room or admitted to the hospital through the emergency department (and if the patient has an established physician, regardless of specialty), if the patient provides the name of his/her treating physician, the patient’s physician is generally contacted – whether or not the physician has hospital privileges or doesn’t live in the area.

The patient’s physician, or physicians, are generally advised of the patient’s condition and are asked for information that could be relevant to the patient’s care.

Question | Who takes care of the patient in the hospital if the patient’s physician doesn’t have privileges to practice there?

Answer | Care is conducted by a hospitalist, our hospital’s on-staff team of physicians.

Question | What is a hospitalist?

Answer | The U.S. government’s Centers for Medicare and Medicaid Services describes a hospitalist in this way: “A doctor who primarily takes care of patients when they are in the hospital. This doctor will take over your care from your primary doctor when you are in the hospital, keep your primary doctor informed about your progress, and will return you to the care of your primary doctor when you leave the hospital.”

Question | What is the hospitalist’s role in patient care?
Care of Patients that do not have an established relationship with a physician holding privileges at the Hospital

Answer |
The hospitalist may consult with an on-call physician specialist for care needed by the patient. Often, hospitals and other healthcare facilities do not have physician specialists on-site at all times. At Parrish Medical Center, there are on-call physicians and back-up physicians representing physician specialties (internal medicine, cardiology, oncology, neurology, orthopedics, etc.) available for consults every minute of every day.

For example, if an oncology patient condition requires a consultation, the hospitalist coordinates with the oncologist on-call. However, the patient’s condition may not require a consultation. For instance, if the patient is in the hospital for symptoms that do not require treatment from an oncologist — such as dehydration, a localized infection, or an injury (to name a few) — a hospitalist may be, or may assist with contacting, the appropriate treating physician.

Question |
Is it common for a patient’s care to be provided by a hospitalist?

Answer |
Yes. It may not be possible for physicians to hold medical staff privileges at every hospital at which their patient might require care. That’s the reason hospitals have hospitalists, supported by on-call specialists.

For example, a person traveling far from home — and who has an established physician — may become sick or injured and require hospital care where their established physician does not have medical privileges. The physician from the hospital at which the care is provided may place a courtesy call to the person’s established physician to inform them of their patient’s status at the hospital.

In these situations, the established physician often sends the patient’s medical record to the treating hospitalist. Thereafter, the patient’s established physician follows the patient’s status remotely.